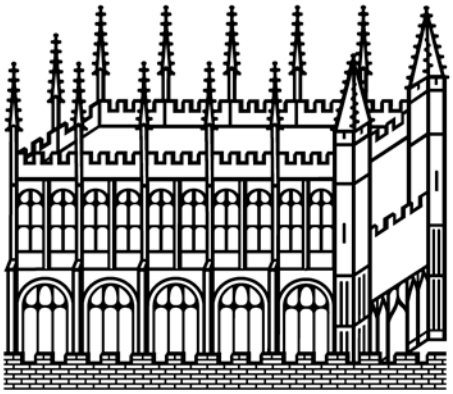


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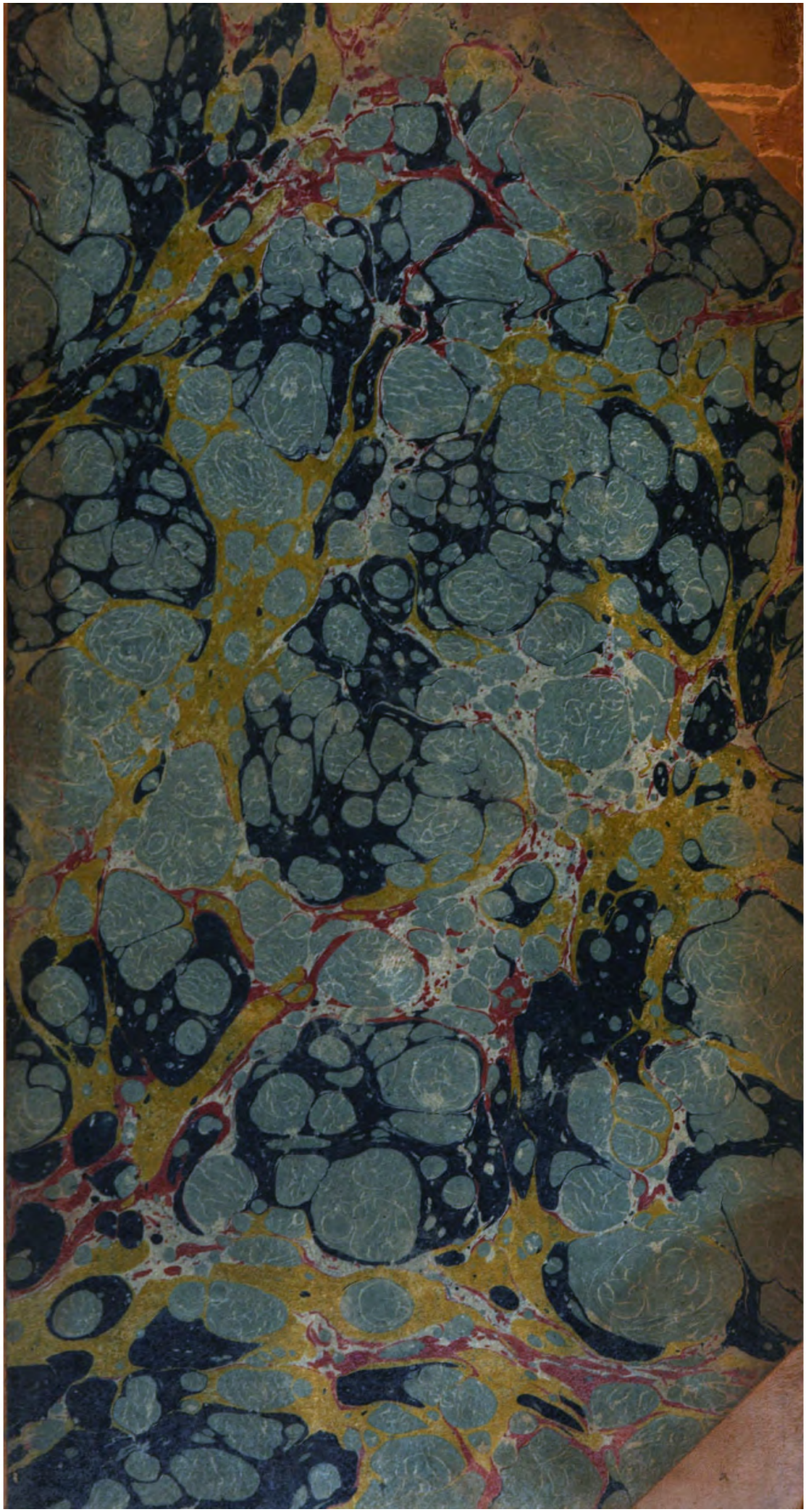
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THE

LONDON

MEDICAL AND SURGICAL

SPECTATOR;

OR,

MONTHLY REGISTER OF MEDICINE

IN ITS VARIOUS BRANCHES:

CONTAINING

ORIGINAL COMMUNICATIONS;

CASES AND REVIEWS

IN

MEDICINE, SURGERY, MIDWIFERY, AND PHARMACY,

WITH A VARIETY OF

MISCELLANEOUS MATTER,

AND OTHER PROFESSIONAL INTELLIGENCE.

VOL. II.

January to April, 1809.

——— Like the industrious Bee,
Culling from ev'ry Flow'r.

London:
PRINTED FOR S. HIGHLEY, No. 24, FLEET-STREET.
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1809.

PREFACE.

The Editors of the present Work have now concluded their Second Volume, and beg to return their acknowledgments to their numerous and respectable Correspondents who have favoured them with their contributions, which, in point of practical information, they flatter themselves will be found equal to any other publication of the kind.

VOL. II.] *January*, 1809. [No. VI.

THE LONDON
Medical and Surgical SPECTATOR.

EMPIRICISM.

ON inspecting the list of the Patent Warehouse, what a formidable array does it present! How numerous are its weapons of destruction, compared with the forms of the Pharmacopœia. In one shop bill alone we have reckoned 300 specifics for the cure of different diseases. These are all in their turns eagerly caught at in the hour of pain with the anxious, though too often unavailing hope of procuring relief, as "drowning men catch at straws." But this relief, even if by chance obtained by the use of some of them, is often productive of a more dangerous malady. We may instance a case lately brought to our knowledge: a *constitutional* ulcer had been rashly healed with a specific by an ignorant empiric, which soon sent his patient to "that undiscovered country, from whose bourne no traveller returns." A few days after this doleful event, the widow happened to meet the Doctor. She curtesied low to him, and gratefully thanking him, paid him this compliment on his skill: "God bless you, Sir; you cured my husband, but he died in three weeks afterwards!"

In fashionable life the use of the nostrums of the empiric is become part of the etiquette of the day. A dose of some alterative, if the life of the gentleman has not been altogether

pure, as Velno's Syrup, Brodum's Specific, or Solomon's Balm of Gilead, is taken in preference to a forenoon lunch before going to take a ride; or his nerves are invigorated by some Cordial of the same class. His dinner is next succeeded by taking an Antibilious Pill to assist digestion; either James's, Dixon's, or the highly-famed William Barclay's. In the morning his teeth, if he has any, are well rubbed with some of the dentifrice powders, or washed with a tincture of the same description, such as the Chevalier Ruspini's, or others of equally fashionable notoriety. His hands are cleaned and perfumed with medicated soaps, and washing-cakes, as the Bandana, Sicilian Bloom, Rose Soap, and a thousand others; and, lastly, his face owes its rosy tinge and delicate hue to some high-prized cosmetic, as the Bloom of Venus. Should a pimple unfortunately appear, it must be immediately removed by a careful use of Gowland's Lotion, as a death-blow to comeliness and fashionable appearance.

When these circumstances are considered as attaching themselves to the conduct of men, of what is termed the superior sex, need we wonder at the encouragement given to empiricism by those who are understood to be the weaker part; and that such deceptions should have still greater influence on their minds? They do not perhaps take, like the men, their forenoon alterative, but they swallow in place of it their nervous cordial, and anti-hysteric water, such as Silby's Solar Tincture, Rymer's Cardiac, and others. Instead of the Antibilious, they prefer also perhaps the Female Pill of Hooper, or the more favourite one of Widow Welch; and, as they are sometimes bad sleepers, they close the day with their dose of some celebrated narcotic, as the long-used Paregoric Elixir, Dalby's Carminative, &c. &c.

Thus, while the idea of health ingrosses the chief business of the day with persons of fashion, amusement, and fortune, the very means employed are the source of subvert-

ing it sooner, and wearing out the constitution more rapidly than nature intended should take place. The springs of life are thus goaded on, and, like oil poured on the fire, it burns more forcibly only to be sooner extinguished.

TOOTH SPECIFICS.

(Continued from Vol. I. page 424.)

From this account of the teeth, it is clear that their outer covering or enamel must be chemically acted upon by all acids, and mechanically worn by irritation or friction. In the composition then of all tooth-powders and tinctures, these two evils are to be avoided, though it is never done; and to shew their injurious effects, we shall here quote the opinion of a popular physician, Dr. Nisbet, who has paid attention to the subject.

"As the teeth are so liable, from their office, to be affected by matters taken into the mouth, the first and most natural precaution is, to remove these before they can act against their surface, or any effects of heat and stagnation take place. The practice, therefore, of washing after meals, cannot be too strongly inculcated.

"Where tartar also forms, it is most observable in the morning, adhering to the teeth and gums. This points out the propriety of the teeth being regularly cleaned every morning; and from the gums inclining to softness and sponginess, as well as this adhesion of tartar to the enamel, a proper tooth-brush, such as recommended by Dr. Lind, should be employed for the purpose. If a soft tartar is already formed on the teeth, before adopting this plan, the addition of some finely levigated charcoal should be used along with the brush: but if the tartar has formed a firm solid body adhering inseparably to the teeth, and forming, as it were, part of their substance, the best practice will be to

separate this by proper instruments, and then the method proposed will be effectual for preserving them in a healthy state.

"But instead of this safe practice recommended, persons anxious only to have their teeth cleaned, without regard to the means employed, have had recourse to certain modes of effecting it, which, though answering the purpose in the mean time, have, in the end, been attended with the most pernicious consequences. These methods, however various, may be all reduced to two heads, being the effect of strong mechanical friction, or chemical solution.

"The former depends on the use of certain powders, variously coloured according to the views of their inventors, in the composition of which pumice stone, or some other gritty substance, forms a principal part; this preparation, rubbed daily with the assistance of a brush against the enamel, produces no doubt a polish and whiteness on its surface, but from the strong friction this effect can only be produced at the expense of the enamel, or by occasioning a partial detrition of it.

"That this is really the case, has been established by actual experiment, for if a sound human tooth be placed in a vice with the convex side upwards, and rubbed with a brush charged with any tooth powder, in less than an hour, by continuing the rubbing, the enamel of that part exposed to the friction will be entirely destroyed. In repeating this experiment, with the different compositions sold under the title of tooth-powders, the same effect has been known to follow, only varying a little in the time required, according to the fineness of the powder.

"From this fact a calculation may be formed, supposing such powders used twice or thrice a week, and rubbed for each time one-fourth of a minute, in what length of time the enamel may be entirely destroyed; by such calculation, it will be found to require only a very few years.

" To render the above experiment still more conclusive, it need only be observed, that the teeth never receive any renewal of the enamel, when worn away. That it increases only in growth and fineness till the age of twenty; but that after that period it receives no addition, but on the contrary gradually decays, so that by the age of thirty it will frequently be entirely gone. Nay, its original thickness, even in full growth, is not more than the twenty-fourth part of an inch, how soon then must continued friction itself against such a thin structure produce an abrasion.

" The mischief of this practice many have attributed less to the powder than to the brush that applies it, and they have therefore substituted a cloth in place of the latter. To shew, however, that this idea is ill-founded, the same experiment may be repeated as already related, employing a cloth instead of the brush. The same effect will be found to follow it, with this difference, that the cloth, by not entering like the brush into the interstices of the teeth, does not render the polish so complete.

" When the teeth possess a thin scale of tartar, the use of prepared charcoal will in time remove it.

" After a thick tartar has been removed by instruments, it will prevent its re-accumulating.

" The teeth that are not regularly clean, should be more rubbed with it than the others.

" Lotions are sold under the name of tinctures, and the chief part of their composition consists always in a certain proportion of mineral acid. Hence they turn out, when examined, very powerful in softening and destroying the enamel.

" They are much more easily applied than the powder, are very quick in producing their effect, and are therefore too often preferred. But in proportion to this quickness of their operation are their bad effects produced; and the slower

any effect is produced on the enamel, the safer is the action of the remedy.

"All tinctures, then, for the teeth, are composed of mineral acids, diluted and concealed under various artifices: and that this is the case is clear,

"1st, From their sour astringent taste, conveying to the teeth a peculiar rough sensation.

"2d, From their effervescence on the addition of an alkali; and,

"3d, From the known effects of mineral acids on the teeth, when submitted to their operation by way of experiment.

"From experiments made on this subject, it appears, that a mineral acid is the only menstruum by which the enamel of the teeth can be speedily cleaned; and that, though all acids are powerful solvents of the teeth, yet that the vitriolic is the only one which has also the singular effect of whitening them. Hence it becomes necessarily a principal ingredient in all such compositions. Nay, it may be observed, that even in its most diluted state the effects of this acid on the enamel are the same; and though several attempts have been made to meliorate its hurtful principle, and yet preserve its property on the enamel, it appears that those properties cannot be disjoined, and that such attempts are merely a deception of their authors on the public.

"Thus, all acids seem to have a particular tendency to destroy the structure of the teeth, and that in proportion to the strength of the acid principle they possess.

"By the nitrous or muriatic acid the substance of the teeth can be entirely destroyed in one or two days. In the vitriolic, again, this operation is slower, and it seems to take place more by acting on the cementing principle than on the other parts. In the vegetable acids, though this effect is proportionally weak, yet it does take place in a con-

siderable degree, which is evident from the effect of tartar, and also from the similar known effects of sugar, sweet-meats, &c.

"In all the countries where much vegetable acid is used, particularly in the West Indies and other southern climates, the teeth of the inhabitants are seldom good. Sugared meats and liquors again produce, while they are in the very mouth, symptoms of roughness, tooth-edge, and pain; and the teeth of such people as use them are susceptible of pain on the slightest impressions of cold or chewing.

"To these bad effects of mineral substances on the teeth themselves, may be subjoined that of others which act upon the gums, and thus, in an indirect manner, have the same hurtful tendency. The chief of these is the use of tooth-picks. The gum is spread closely between the teeth, and it is intended by this closeness that the teeth should support each other in their place. Whatever then widens the interstices between the teeth, must tend to destroy the intention of nature; and independent of this also, the frequent use of the tooth-pick affords a more convenient lodgment for the food. Instead of the tooth-pick, therefore, a small hair brush, like a pencil, should be used, which will answer the purpose, and obviate all the inconveniences that have been mentioned."

CHEVALIER RUSPINI'S MEDICINES.

Every Dentist acts as an empiric, and his medicines consist generally of a powder and tincture, the composition of which is kept as a secret, and they are vended either by himself, or go into the Patent Warehouse. The first we shall notice of this class is the Chevalier Ruspini's Dentifrices, being operator to the Prince of Wales, and of course the director of *fashion* and *form* in this department.

TOOTH POWDER.

Take of orris-root in powder—carmine, or rose pink, as

much as will colour it—add powder of scuttle-fish-bone, equal parts.

The scuttle-fish-bone is a species of carbonated chalk or whiting; so that the whole of the box-full of the composition is not worth above one penny.

TINCTURE.

TAKE red rose leaves, infuse in warm water, and, when strained, add to the infusion one half or a third of common spirits.

A little acid would have made this the infusion of the Dispensary. Though not a very active tincture, we consider it as not a bad composition for the teeth.

LARDNER'S PREPARED CHARCOAL.

CHARCOAL Powder has been long highly estimated as a dentifrice, and its antiseptic qualities have been largely expatiated upon. Mr. Lardner's preparation, however, is not pure; it contains a mixture of chalk, or other testaceous powder, and the proportion of charcoal seems to serve only for the colouring. This is an imposition on the public. We do not object to the real charcoal as a dentifrice, if finely levigated, but we object to the carbonate of lime mixed with it.

CONCENTRATED SOLUTION OF CHARCOAL.

MR. LARDNER accompanies his Powder, as is usual with the Dentists, with a Tincture for the same purpose. A concentrated solution is nonsense in the extreme; but, in place of it, Mr. Lardner has given this appellation to an infusion of roses impregnated with myrrh. We can see no harm in this composition, if he gave it its real title.

AREKA, OR BETEL NUT.

THE charcoal of this substance, we are told, is the great dentifrice in the east; but we doubt this fact. We cannot see what superior quality it can possess over other charcoal; and we suspect the latter is generally used under this exotic appellation.

REGULAR PRACTICE.

I. MEDICINE.

Medicine is, more than any other, the science of speculation. Induction, though introduced, has not been strictly adhered to in the deductions from facts, nor have facts been investigated on a scale sufficiently extensive, on which to form a basis fit to rear a permanent superstructure. For the truth of this, we need not resort to times of the science beyond the present period.

VACCINATION.

In a former number of this work we gave the Report of the Jennerian Deputation to Cambridge for the investigation of the supposed failures of Cow-pox in that town. This Report, the production of Mr. Blair and Mr. Ring, offered a satisfactory explanation to the public on this head. But since that time a different statement has been presented to the Royal College of Physicians by Sir Isaac Pennington, Professor at Cambridge, containing 25 cases of failure of Cow-pox as a preventive of Small-pox, thus leaving the College to exercise their judgment upon them; but proving in a strong manner the certainty of the fact.

Sir Isaac's letter is written with a coolness and candour which form a contrast to most other writers on the subject, and give a greater interest to his assertions. We hope that on this evidence an opinion will be delivered by the College, which the importance of the matter, as well as Sir Isaac's respectability, equally claim.

The introduction of Vaccination into China has been attended with some obstacles which have not occurred elsewhere, arising from the apathy of the natives, the prejudice of their medical men, and the *matter* not being easily

procured by those who were anxious to disseminate the practice. Some trials, however, have been made with their usual results by Mr. Pearson, surgeon to the British Factory at Canton; and it is to be hoped that these will in time draw the attention of the natives to a predilection for this preventive of so fatal a disease as the Small-pox is found to be amongst them.

ABSTINENCE.

The remarkable case of abstinence noticed in our last number has undergone a farther examination by Dr. Bourne, who, after relating the particulars of his visit to the patient, gives the following history of it from her own recital.

"Some time prior to the summer of 1806, she was troubled with occasional pains of her sides and stomach, especially after eating, but her food was not then rejected; and she did not consider herself so ill as to pay any particular regard to these circumstances. She had had, for a long time, the care of a boy who had the evil, on whose body were a number of very offensive sores. At the above period her appetite began to decline, and what little food she took, her stomach nauseated, but did not reject; and she fancied it had the smell and taste of the ulcers of the scrophulous boy. In November following she felt herself unable to do her usual work, which was that of picking or beating cotton. In the month of March 1807, she was seized with fits, which by her description appear to have been epileptic; these continued about a fortnight, and were succeeded by cramps at the stomach and vomitings. She has had no fits since. About Easter of the same year, finding a total want of appetite, and much pain after swallowing, she gave up the attempt; and has never taken any thing solid since; nor has she had any desire for food. For some time she continued to take now and then a little tea and water, as mentioned above; but having now no thirst at any time, she contents herself with washing her mouth only two

or three times a week. She has had no stool since the third of August, 1807; but she passes from half a pint to a pint of pale urine once in two or three days."

This statement of the patient Dr. Bourne follows by the subsequent observations:

"This extraordinary mode of life, as might be naturally expected, did not obtain general belief: and she was accordingly looked upon by many of her neighbours as an impostor. To dissipate this notion she consented to be removed to another house; where she was attended day and night for nearly three weeks, by persons consisting partly of medical men, and partly of such of her neighbours who disbelieved her story. These relieved each other regularly every four hours, and were satisfied that during the above period she took neither food nor drink, excepting once, by desire, she swallowed a spoonful or two of water; which gave her much pain.

"Such are the circumstances attending this case, as collected by the testimonies above described; but, forming perhaps an unique instance of such protracted abstinence, and so very contrary to the established habits and indispensable wants of animated nature, many persons are yet nevertheless disposed to disbelieve the fact. If, however, there be any deception in the matter, it appears to be the most complete imposture ever practised. I think we can scarcely withhold our credit to the three weeks trial; and if so, I see no reason for doubting the truth of the whole. It is true indeed that, in many cases of disease, in fever especially, we find an almost total cessation of appetite for solids for three or more weeks; but then there is usually an increased desire for liquids; and at the termination of the disease, the general appetite returns. It is owing to a want of appetite entirely, I imagine, that the continuance of life here, under the privation of food, is to be accounted for. For hunger, if not satisfied, is itself a stimulus, which would

in time destroy the body; hence those unfortunate persons, who are completely deprived of the means of gratifying this appetite, quickly die. How then has life been sustained in the case before us? If we examine the subject philosophically, I think we may come to some rational conclusion. The elementary principles of the human body, or those into which it may be reduced, by means of chemistry, are very few. The food, whether solid or liquid, destined for its nutrition, and repair of the changes and waste it undergoes during life, is also resolvable into the same elementary principles. And these principles are moreover present in the atmosphere which we breathe, combined as it always is with watery vapour, &c. And it is only by the different combinations and modifications of these few elementary principles that the various articles of food; nay, the almost infinite variety in the products of nature, present themselves to our view; that one thing is sweet, one is sour, and another is bitter; this is soft and that is hard; one proves salutary, and another poisonous, &c. And according to the relative affinities which these elements have with each other, one is more readily than another acted upon by the juices of the stomach, intestines, &c.; or in familiar words, one is of more easy digestion than another. The universal receptacle for food, in mankind at least, is the stomach; but if the body be supplied through this medium with nutriment, containing only those principles which exist in the atmosphere which surrounds us; and if, by the total want of appetite, this supply be precluded by the usual means; it is reasonable, or it is not unphilosophical at least, to suppose that life may be sustained, if the same principles can gain admission by other channels. It appears that the vigour and strength of the body cannot be maintained in this manner, as is the case with the subject under consideration; yet life itself may thus be preserved for an indefinite period. The well-known instances of hybernating

animals afford proofs of its continuance for months by respiration alone.

" I shall conclude with a few observations on two or three of the particulars noted in this case. In the first place, the nutrition of the system is evidently introduced by the lungs; it is not our purpose to inquire here by what means it is afterwards assimilated; she lives *apparently* on air alone; to use her own expression " she loves air," and has the chamber window constantly open. As she almost continually lies in bed, it is not probable that much is furnished by absorption from the general surface of the body. But it seems that a kind of digestive process is carried on in the intestinal canal; and that a species of chyle is there formed. That there is some secretion there, which undergoes a decomposition of its elementary principles, is apparent from the presence of air and moisture, which we discovered by pressing the abdomen with the hand; hence arise the frequent eructations of flatus, &c.; but from the tenuity of the matter imbibed, there are no gross particles to form what is usually evacuated by stool. The hardness of pulse and dry state of the skin, seem to indicate that there is not a sufficiency of moisture introduced into the system to answer the general intentions of nature; and probably owing to this defect, life will be gradually exhausted. I apprehend that a thickening, perhaps an ossification of the arterial system, has thus commenced, and will keep increasing; having begun at the most remote points from the heart, which afford the greatest resistance to the action of that organ; thence ascending to the greater vessels and to the heart itself; and from the gradual obliteration of these, life will become extinct in like manner to the burning out of a lamp. How long a time may be necessary for the completion of this process it is impossible to say; but from present appearances there is reason to believe she may continue some months longer. It is probable the frequent use of the warm bath, if she could bear it, would tend to defer her dissolution."

HYDROPHOBIA

Is still the demon of the day; but it is kept up by controversional reasoning, rather than elucidated in its nature, or ameliorated in its treatment. If we cannot cure, the object should certainly be to prevent, and, whether the disease exists or not, to take such precautions as may give a chance of superseding the constitutional attack. Every patient, therefore, injured by the bite of a dog, should be treated, whether rabid or not, as if this state were actually to be expected. The period of attack being so uncertain, as from five or six weeks even to a twelvemonth, or more, no relaxation should take place in any efforts directed to his safety. One great point seems to be preventing the healing of the wound; for the wound healing so readily as it generally does, impresses the patient too much with the idea that no poison can exist, or be communicated by it.

Though hydrophobia occasionally occurs, we can see no reason for its being considered *epidemic*, or more frequent in its appearance now than at any preceding period of medical history. The leprosy, it is true, has disappeared in Europe; but this is evidently produced by the change of living and progress of civilisation. On the disappearance of Small-pox, nothing as yet for a series of years can be decisively stated.

Experiments on rabid animals would tend much to elucidate the subject of hydrophobia, and lead to a treatment which might prove ultimately successful against the symptoms arising from it as a disease.

SEQUEL OF DR. POWEL'S CASE IN REGARD TO ANN CHANDLER'S CHILD.

Dr. Powel's case has certainly had the effect of calling the public attention very strongly to this subject. The sufferings of Ann Chandler have been minutely described; and, in consequence of that description, an attempt has been since

made to shew the disease, by some similarity of symptoms, to have been communicated to, and to have proved fatal to, her child.

The statement of this case of Ann Chandler's child we shall here give, as detailed by Mr. Hodgson. The child died when three months old; and Mr. Hodgson prefaces the case by observing that "it is not yet ascertained, whether the human subject can communicate the venom which produces hydrophobia, still less whether such communication can affect a child sucking at the breast of its mother whilst under the disease.

"On Monday, August the 8th, eight days subsequent to the removal of the child from the breast, I was requested by the nurse of the child's ward, in the workhouse of St. Sepulchre, London, to see a child who had been seized with convulsions, to which I immediately attended.

"SYMPTOMS.

"On examining the child, there appeared spasmodic affection, especially about the eyes; her stools were black. I ordered medicines, which relieved the bowels; but on the following day, certain appearances about the head induced me to communicate my doubts to Dr. Powel, whether the mother's disease could be the cause of the child's. He did me the honour of seeing her on the Wednesday, and gave it as his opinion, that the child's disease was not hydrophobia.

"I saw it on Thursday the 11th with Mr. Tuckwell; it had screamed in the night, there was much excitement, a quick pulse, and heat, but no marked appearance of the disorder in his opinion. The bowels remained better.

"Friday, the symptoms increased, and the bowels were again unwell. I had recourse to the same medicines, which relieved her, but in the evening she was seized with (as described by the nurse) staring and fixed eyes, difficulty of swallowing, with a vomiting and a frothy appearance from the mouth.

" Saturday the symptoms about the head remained the same; the bowels were quiet, and the motions nearly natural as to colour and consistency.

" Sunday morning, it screamed; the other symptoms much the same.

" Monday, the symptoms of the head were much increased, and the whole body put on an appearance which prognosticated dissolution.

" Tuesday, when I saw her, strabismus had come on; the eyes, particularly the left, seemed insensible to light, and one side was much warmer than the other.

" I requested Mr. Clarke to see it, and took a tea-spoon filled with water and poured it into its mouth. It passed the œsophagus, but we were both of opinion that giving the water produced spasmodic affection.

" I saw it in the evening with Mr. Wheeler, who was of opinion, there was no distinct sign of hydrophobia, and at eight o'clock she died.

" APPEARANCES ON DISSECTION.

" On Thursday about one o'clock she was opened; the vessels of her head, like her mother's, were overcharged; there was more water than usual in the ventricles; the whole abdominal and thoracic viscera were perfectly healthy.

" It was agreed that hydrophobia was not identified in the child, but it might be said there had been much nervous irritability, and the only doubt is, whether such irritability might not be occasioned by the mother's disease.

" In this case, we find a child in perfect health, until she is taken from the mother, who has suffered death from the bite of a mad cat, which death is not produced till thirty days after she is bitten.

" The strabismus, a diagnostic sign of hydrocephalus, appears on the ninth day, but the increased actions on the fourth.

" It is also to be remarked, that upon dissection, we find no distant cause from the appearance of the bowels or any

other part of the viscera, that hydrocephalus could produce, as they were in a most healthy state.

"The difficulty of swallowing on Friday, and the vomiting which followed, together with the observation of Mr. Clark and myself, on giving water to the last day, are circumstances by no means unimportant."

SYMPATHY BETWEEN THE BRAIN AND STOMACH IN CASES OF DISEASE.

Dr. Beddoes has endeavoured by dissections to establish a curious pathological consent between the Brain and Stomach.

"In various instances," he observes, "an inflammation in the upper part of the stomach shall arise, when the brain with its appendages are turgid with blood in an extreme degree, or inflamed; and the stomach shall sometimes exhibit no pain or other sign of inflammation. This sympathy seems alike, whether the brain suffer from external or internal causes. Dr. Haen, as I have observed in my *Researches on Fever*, touched with a red hot iron the skull of a boy affected with amaurosis, and with periodical vomiting. The boy ate a good supper on the fourth day; had periodical vomiting, and died in six hours after his supper, with intense inflammation of his brain, and the cardia even gangrenous in two spots; prodigious adhesion of the lungs; as also was the case in a girl likewise cauterized, but whose stomach shewed no inflammation.

"I mean not," he adds, "to present this (secondary?) inflammation of the stomach as a general law. But I think, whenever the upper part of the stomach is found unexpectedly inflamed, the head (a circumstance so often neglected) should be opened too."

YELLOW FEVER.

In our former numbers the important subject of Yellow Fever, the scourge of the tropical regions of America, has occasionally claimed our attention. In the treatment of this

formidable disease, our preference has been decidedly given to the mercurial practice, or the mode of raising and supporting healthy inflammatory action in such a manner as may counteract the state of asthenic debility produced by the operation of the morbid cause. The superiority of this practice, the offspring of tropical observation, is attested by all the most modern writers who have seen the disease; and the decided sanction it has received in Jamaica in particular, the subjoined testimony of the united medical experience of that island will confirm to the satisfaction of the most sceptical, as the only certain mode of affording relief, and saving the victims of this deplorable malady. This testimony has been brought forward in consequence of a literary controversy betwixt Dr. Grant and Dr. Dancer of Jamaica.

On subjects of medicine we consider the disputes of professional characters as favourable to the cause of science. Collision of opinion ever leads to improvement. Like the flint struck against the steel, it gives brilliancy and acuteness to the ideas of the disputants. If personalities, which is unfortunately too often the case, intervene, it is easy for the spectator to separate the gold from the alloy. That there is too much personality in the controversy of these gentlemen, we admit. Dr. Grant, wedded to the old practice, contends for *bleeding* and *bark;* while Dr. Dancer is an enthusiast in favour of the new doctrine, in which he is joined by the whole medical science of the island, with one or two exceptions. Dr. Dancer's opinion he states to the public in the following words:

"There being at present but hardly one opinion amongst the Medical Practitioners of this island, concerning the best known mode of treatment in Yellow Fever, it is matter of regret that *any thing* should have appeared so entirely out of date, to provoke fresh discussion on the subject.—The public are unhappily too well convinced, by experience, of the fatality attending the practice of *large bleedings* and *giving*

the bark in Yellow Fever, to be either imposed on by the bold assertions of an *individual* (Dr. Grant), or to be influenced by the opinion of Reviewers in Europe, who, with all their competency for general criticism, cannot be supposed qualified to decide on a question of this nature, which can only be determined by actual observation and experience; and not by *ex parte* documents.—There is not a merchant or head of a family in this, or any of the sea-port towns, who is not, by the frequent and melancholy opportunities he has had of seeing cases of Yellow Fever, better qualified, in some respects, to give an opinion concerning the disease, than the whole College of Physicians.—Physicians will judge always from what comes under their own observation—and, with respect to Yellow Fever, the Medical men in Europe know nothing; except those who have been in the West Indies, and have practised there, who are almost unanimous in their opinion concerning the *danger of bleeding, the mischief of giving bark, and the utility of giving mercury.*

"It would be superfluous to quote authors; but if there be not ten, or at least five, to one, in favour of the use of mercurial treatment in Yellow Fever, let the contrary be shewn."

In confirmation of the propriety of this opinion of Dr. Dancer, the following farther testimony has appeared by the different medical characters practising in Jamaica:

"We the undersigned practitioners of physic in the city of Kingston and island aforesaid, conceiving that we are called on by the duty we owe the public, and in justification of ourselves against the charge of mal-practice, to state our opinion concerning the best known mode of treatment in Yellow Fever; do, on the fullest conviction, after long experience, solemnly declare, that in our judgment, the practice of giving calomel and employing mercurial frictions, so as to induce a slight salivation, is the safest and most success-

ful; other means are, due evacuations by stool; affusion of cold water, &c. &c. not being neglected. But we are firmly of opinion that blood-letting, except in the moment of the attack, is highly detrimental, and, even at this crisis, the admissibility of it may in most cases be justly questioned.

"We are further of opinion, that the administration of bark in this fever (of no type) is, if not in most cases impracticable, highly pernicious.

"Lastly, we beg leave to mention, that so far as we are acquainted with the sentiments of other practitioners in different parts of this island, and of the other islands of the West Indies; and of the surgeons of the navy and army, they entirely coincide with those we have expressed.

"To the testimony of the undersigned might be added that of several eminent and respectable practitioners now no more, or who have left the country."

NEW PRACTICE IN DIABETES, AND CERTAIN NERVOUS DISEASES.

Among the new suggestions with which the science of medicine teems, is the practice of copious blood-letting in Diabetes, attempted by Mr. Watt of Glasgow. The dangers of this operation, either from the state of the pulse, from its tendency to induce dropsy, or from the decomposed state of this fluid, are considered by him as groundless objections, and that it is the effect alone of the operation, when performed, we are to judge from. Though we do not wish to call in question the veracity of Mr. Watt's success, in the cases he has instanced, as proofs of the propriety of the principles of treatment he contends for, yet the use of this Herculean remedy we deem deserving of much caution in these enfeebled times of British constitutional vigour, and that the vital stream, the storehouse and reservoir for all the wants of the system, should not be rashly dissipated. These remarks are naturally suggested by the very different

ideas we have been led, from the experience of all former practitioners, to entertain on these maladies. Evacuation, as a primary and curative indication, has never been acknowledged to constitute the basis for recovery in such states of the system. Perhaps Mr. Watt has been led to pursue the steps of an eminent Edinburgh practitioner, Dr. James Hamilton, Physician to the Royal Infirmary, whose observations on the use of purgatives in a variety of diseases are carried as far as the subject will warrant. Purging and blood-letting are two very different evacuations. The former can be borne in great states of debility often with advantage, where accumulations exist, seldom with very quick fatality; but blood-letting we have known, in *a single* operation, sink the patient at once, and often irretrievably. In cases of debility, where blood-letting is employed, the symptoms of plethora in the sanguiferous system should be strongly marked before the operation is resolved on. We hope Mr. Watt's future details will be so numerous as to remove all scepticism in regard to the propriety of his principles; till then, we are sorry to give a *veto* against their imitation.

MONTHLY REPORTS OF DISEASES.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—As your miscellany forms a medium for communicating to the profession at large such proposals as greatly interest them and the public, permit me, through its channel, to offer my suggestions on an extended plan of Monthly Reports of Disease, as it occurs in the great public charities of this city, in order to form a foundation for professional improvement, in regard to its *extent*, *nature*, and *fatality*.

I am, Gentlemen,

Your obedient Servant,

London, December 14, 1808. W. NISBET.

Communication of Dr. Nisbett, on an improved Plan of Monthly Reports of Diseases, addressed to the Physicians of the Hospitals and Dispensaries of the Metropolis.

Gentlemen—THE first object of every professional character ought to be the improvement of that science, to which he has devoted his attention. It is one paramount to every other in its interest with mankind, and it is one, therefore, to which mankind must ever look up with veneration and gratitude, as imparting the means of suspending and removing those sufferings which unfortunately "*flesh is heir to.*"

The knowledge of this science is only acquired by experience and observation; and on no part of it can these be more usefully employed than in forming accurate reports of diseases, and from such reports drawing the proper inductions that establish our opinion of their nature—of the frequency of their attack, of the constitutions most subject to particular diseases, and in the end of their comparative fatality.

No situation offers such an extensive field for this purpose as the great medical charities of the metropolis; and to you, Gentlemen, I beg leave to offer a few suggestions on the importance of this point, as one connected with the performance of your public functions in your several charges, as one from which society in general, as well as every branch of the profession, must reap the most solid advantages, and as one necessary to the intelligence of the legislature itself, in forming statements of the population and strength of the country, which can only be judged of by ascertaining the extent of the ravages from disease.

From these considerations, I can have no doubt of your zeal and philanthropy to assist in making such arrangements as may convey the necessary information that the execution of such a plan requires.

Hitherto attempts have been made, on a very trifling scale indeed, to give such reports; but even these attempts, trifling as they have been, have been attended with their advantages. Dr. Reid's Reports of the Finsbury Dispensary are connected with remarks which shew acute observation, and offer useful hints; but they are too limited to afford the knowledge which, from such reports, we should wish to draw. Previous to these, Dr. Willan's were more extended, and in his hands they gave rise to a small treatise on the diseases of the metropolis, which contains many useful practical remarks adapted to the local situation of the metropolis and its inhabitants. Some reports also have been made of the Eastern District of London, but on the same confined scale as the others. The example thus set, however, has been followed at Edinburgh, and I give it the same commendation which all such attempts deserve, as leading, in the hands of men of ability, to much useful professional information.

But in order to reap all the benefit which such a plan must produce, on an extensive scale, a leading example should be set by each of you, Gentlemen, to the country at large. I would propose, then, that a regular monthly report be made by such persons as you think proper to appoint in your respective charges of the patients that come under your management. The report should consist of five heads; the disease; the age and constitution; the sex; the profession; and the issue of it.

By a correct statement of the first, the proportion of acute to chronic diseases is clearly established; and the frequency also of one disease in its attack, compared with another. This comparison fixes the relative importance of particular diseases in the scale of practice, and the attention they deserve, in point of forming a foundation for a separate line of attendance, or claiming a more than common attention in the duties of ordinary attendance. The advantage of this separate consideration may be instanced in

consumption, gout, rheumatism, &c. which all afford an ample field for distinct lines of practice.

The second head, or the age and constitution of the patient, is another important subject. By comparison on this head, we are able to observe what are the critical periods of life, beyond which the span of existence is not to be protracted. This period is found to vary in different constitutions, and the causes of longevity have occupied the pens of the ablest writers, without bringing the knowledge of them to that criterion which is to be wished. Till this is understood, every plan for the preservation of health must be defective, as the Juvantia and Lædentia cannot in their effect be completely determined without it. Old age, we know, in certain constitutions, becomes evident before the thirtieth year; in others it is extended to the usual period; but instances have occurred by premature animalisation, that the system has been exhausted, and the springs of life completely worn out by a natural decay before the twentieth year.

The third head, or the sex of the patient, is another point equally deserving notice. The constitutions of the sexes we become thus acquainted with in respect to their liability to disease in general, independent of the attack of those maladies which are peculiar to each; and a comparison can therefore be formed, where an epidemic exists, of the chances of the individuals of each sex escaping, and precautions taken accordingly.

The fourth circumstance, or the profession, is a great point, in a general extended view of this subject. That professional occupations accelerate the tendency to disease, or aggravate its violence when taking place, cannot be doubted. They give often a peculiar modification to the appearance of a malady, and they are known also to produce peculiar affections independent of any other cause. In a commercial and manufacturing country this circum-

stance is an important one; and the diseases of the desk, of the artisan and mechanic, would deserve a more minute attention than the general routine of ordinary practice permits.

The last head, or the issue of disease, is the foundation on which we are to establish the mortality of different diseases compared with each other, and is the foundation also for the legislator, ascertaining the strength and population of the state, by comparing the mortality with the births of the country. The bills of mortality vary yearly in their amount, and new circumstances in mode of living, and a variety of other points must always render them fluctuating. Hence the calculations which have been made on this head cannot be permanently correct. They should be provisional for the time, and by the insurance offices, or other departments connected with calculations and annuities, they should be regularly varied in their proportion of rates, according to the changes, in the proportions of mortality, that annually take place. The necessity for this we draw from the original tables of Dr. Price, not applying at present, or forming the foundation of their scale of annuities. Another consideration which, in these cases, should be also taken into account, is the difference between a town and country life. The other points I have stated as connected with the report, *viz.* constitution and profession, should not be omitted any more than the age and sex, which claim the chief investigation.

One circumstance, which renders the bills of mortality at present obscure to medical men, is the absurd reports often made on the causes of death:—these reports are unfortunately in the hands of ignorant old women, who judge from the external view of the body, and form their opinion according to their own vulgar prejudices. To correct this, it would be only necessary, as few persons die without some medical attendance, that the practitioner, who

has visited the patient, should send a note on the death of the person, stating the disease of which he died to the parish clerk, to be inserted in the register, from which the annual bills of mortality are made up. This would make the general issue of all diseases clear, and faithfully establish the proportion of their fatality to each other.

Such a report, Gentlemen, is particularly connected with your own reputation as practitioners. The recoveries and deaths of each hospital, with the admissions, compared among the several charities of the metropolis, (taking the diseases in each to be much the same,) will point out whose practice has been most successful, and whose treatment, therefore, claims most to be inquired into and followed. Many other considerations and advantages might be here adduced in recommendation of such a plan; but not doubting, Gentlemen, that these few hints will excite your attention—that the execution of such a report will raise your characters both in the eye of the public and the legislature, independent of its particular benefit to the profession, I now leave the whole to your own determination. Every physician has an opportunity of joining to his report such professional remarks, as the extensive opportunities of the great medical charities of the metropolis enable him readily to do, and which are at present too often lost to the profession from want of such a regular channel as a monthly report to convey the information. Many dislike making formal communications to periodical works, who would be ready to offer transient remarks connected with the other matter of such monthly details. It certainly would be highly to the honour of the London physicians to set the example of such a plan to the country at large. I flatter myself that this slight sketch will meet your approbation.

In the mean time, I remain, Gentlemen,

Your obedient Servant,

London, Dec. 15th. WM. NISBET.

REPLY TO DR. W. Y.'S CRITICISM ON DR. POWEL'S CASE OF HYDROPHOBIA.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—HAVING in a former number written in defence of the plan adopted by Dr. Powel, I should conceive it a desertion of my principles, did I not reply to the animadversions of Dr. Y.; and as the case is one of public importance, if I offer nothing new, I shall at least excite a desire for investigation.

In the unadorned narration of Dr. Powel, I can discover no leading fact so overstrained as to induce any one to preconceive any partial theory. The case is a decisive proof of the existence of a species of tetanus, that has acquired the name of hydrophobia, rather in compliance to general adoption, than to propriety of expression; but as the term of hydrophobia is properly understood, a misnomen is here of little importance; for, by the general acceptation of hydrophobia, is meant a disease that arises from the saliva of a rabid animal; and as such a disease really exists, by whatever name we may counter-distinguish it, from other species of tetanus; hence, whether I proceed to consider hydrophobia as arising from a specific virus, secreted by the saliva of rabid animals, or a deviation from the general variety of tetanus produced by a lacerated wound, or injured nerve, can be here of little moment, since the treatment will not be influenced by the proximate cause of the disease, so much as by the symptoms, as they concur and arise: and I am supported in this argument by corresponding facts; for, in most species of tetanus, the constitutional disease is healed before any spasmodic affection comes on.

Dr. Powel has distinctly stated that his unfortunate patient, Ann Chandler, was wounded by a cat supposed to be mad: two cats were fighting, and in this moment of high irritation she interposes to separate these furious combatants; in the

struggle the strange cat fixes for some minutes on her wrist with its teeth. Does this wear the face of improbability, or carry with it a desire to bewilder the reader's judgment? No: it bears the marks of the furious attack of a rabid animal, regardless where it fixes its vengeance; and in the high state of furor it then was, it is far more probable it should fix with its teeth, rather than with its claws. The cat, in the pursuit of the mouse, fixes at the same time with its claws and teeth. This is sufficient evidence of the existence of hydrophobia in Ann Chandler, supported by the effects that followed. Nor is it necessary that the dog should have bit the cat to produce hydrophobia specifica, vel contagiosa; for in evidence it appears, a dog supposed to be mad had been seen to play with this cat; it was only necessary to produce this disease, that their salivas should come in contact; which would be the case, if not during the play, immediately after, for the cat would instantly smooth its ruffled coat, by licking it with its tongue, and of course infection followed. Where then, even in this stage of the business, is Dr. Powel's far-fetched evidence? To analogy next your correspondent goes with as much success, as the sequel will show: he tells you, with the acuteness peculiar to analogists, that the healing of the wound is at variance with knowledge and experience; because, on the introduction of the variolous or vaccine matter, the wound never heals, if the virus is sufficiently acrid to produce the disease; but this opinion is absurd even in theory. These specific poisons are distinctly opposite to each other in their nature, their symptoms and variety; nay, both these diseases will go through their course, without any admixture of each other in the same patient. Hence he would infer that every contagious disease must necessarily produce such a certain quantum of acrid matter, as to fill the body with ulceration, or otherwise he should doubt its existence. He would have us therefore to deny the existence of hydrophobia in the case

of Ann Chandler, merely because some anomalous circumstances were wanting. Swelling of the axilla, a point much dwelt on, never or rarely follows the introduction of the saliva of a rabid animal, nor do I conceive the swelling of the axilla to form a necessary criterion of the disease. Your correspondent then demands imperiously to know a fact already elucidated, but more particularly in the one before him: "whether a disease spontaneously generated, or arising from unknown causes in dogs or animals, can be communicated to human beings?" The case of Ann Chandler is conclusive on this interesting point: a reference to the case will substantiate this assertion. Ann Chandler, at the moment the cats were contesting, was in full possession of health; anxious to rescue her own cat from the attack of a furious strange one, she attempted to separate them, and in the struggle, the strange cat fixes with its teeth on the wrist. The wound is healed by common surgical routine; twenty-six days after, the part inflames, and with it appear some of the first symptoms of hydrophobia, and which, we learn by the well-authenticated narrative of Dr. Powel, gradually increased, till death finally released the patient from the most miserable of all conditions. On this case there can be but one opinion, an opinion which every symptom of it confirms, (*viz.*) that the disease of Ann Chandler was communicated to her by a cat in a rabid state. Respecting the contact and contagion of disease from one species to another, daily experience points out the fact: is not the mange communicated from one dog to another? &c. The case of Ann Chandler becomes decisive on this subject, for there we see the effect of animal contagion producing a disease, that terminates the life of the patient by symptoms as nearly corresponding to those affecting the animal, as the system and structure of the human economy will admit; and this is supported by the analogy which natural history furnishes us, in the attack which the spider makes on the toad. Again, the sting of a wasp and a bee are too well known to require particular attention here:

but these analogies certainly favour the existence of a disease, communicated to man by animals, if a rational doubt could be entertained on the subject: and this doctrine completely militates against the idea, that Ann Chandler's mind was too much absorbed by the nature of her malady, to admit of a fair inference. If a patient perusal of the case is allowed, I think it will be found, in the early part, her mind appears not to be so materially affected by the event, and subsequently, not absolute prepossession of the nature of the disease virtually takes place, till it assumes too decided a character to admit of hesitation. Then indeed we see a calamitous train of events arise; but those, it is evident, arise more from the effect of the contagion, than the prepossession of her mind respecting her disease: the mind, amid the mighty and harassing conflict, appears to have combated long against its enemy; but its energies, weakened by constant exertion, at length yield to its baneful foe, and finally we see the patient fall a victim to rabid contagion in all its horrors.

Next, the want of the pathognomic symptom, an increased secretion of saliva, is also noticed; but this surely admits, in an overflow of more accurate symptoms, of no peculiar inference, but can alone be regarded as an irregularity of the disease, and does not at all invalidate the opinion of Dr. Powel: the attempt to bite is common to hysteric affections, it is true, but it does not follow we are to exclude it from hydrophobia; respecting the effects of sound, nothing new is offered to justify our denial of the existence of the disease. In every simple disease, anomalous symptoms are constantly arising; therefore, in a disease of this rare occurrence, we are not warranted to dispute its existence, because some irregular symptoms may not appear so decided as might be wished. The effect of sound has no great influence in common cases of tetanus, nor does the idea of water produce the sensation in other species of tetanus that we are describing; for the horror of solids and liquids alone belongs to this class,

and may be considered as a distinguishing character of the disease; therefore I have no hesitation in maintaining the correct idea Dr. Powel formed of this case; an idea supported by the termination of the disease.

We next come to the considerations of the mode Dr. Powel adopted for the safety of his patient: he judiciously chose to try the argentum nitratum, a medicine of very high import, and one not uncertain in its operation, therefore the more correct in its application; and though by this mode the patient was not saved, that is no argument against its future trial: for I am well convinced, that in all spasmodic diseases it is an useful medicine, and conjoined with opium may be rendered of important service; in epilepsy its effects are known, and in the ague of low countries it acts as a specific. Thus testimonies are not wanting of its efficacy, and justify its application in this instance. In extreme debility, too, it is a medicine far better than the sulphas ferri, sulphas zinci, or any tonic of that class. Its causticity by the action of the stomach is destroyed, for becoming saturated by a combination of new principles, peculiar to the organ of the stomach, its corrosive action ceases, and its medicinal one commences. Thus, Gentlemen, I see no reason for condemning its practice in the case before us. A bold and decisive practice is ever preferable. I shall take my leave of you for the present, with recommending a careful perusal of Dr. Powel's case to every medical practitioner. In the interim, I remain,

Your obedient Servant,

London, Dec. 6, 1808. THOMAS MOTT CATON.

HYDROPHOBIA.

MR. HENRY THOMSON IN REPLY TO DR. W. Y.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—If ridicule were a certain test of truth, I should find little inclination to interrupt your facetious correspondent Dr. W. Y.

Dazzling are the coruscations of the Doctor's wit, and he has revelled in its brilliancy, even to the total discomfiture of his logic. But of this hereafter—

The obscurity that hangs over the disease called Hydrophobia, can only be dispelled by inferences drawn from well authenticated facts, and it was under this impression that the case detailed in your fourth number was given to the public. I conceived it to be a plain and faithful narrative of facts; but I am accused of "prejudice" and "omission of the most important parts of inquiry." I shall therefore take leave to make a few observations on Dr. W. Y.'s Critique.

It is unfortunate for Dr. Y. that his first assertion, one too on which he builds so much, should be founded in error. I never heard of Dr. Powel's case until a fortnight after my patient had expired.

It appears that Dr. W. Y. considers the disease in question to have been a case of tetanus arising from the wound in the thumb inflicted by the splinter. Some symptoms of tetanus certainly occurred, as is usual in hydrophobia; but is there an instance on record of the appearance of tetanus in this climate in so short a period as that of two days after the accident? It rarely, I believe, occurs in less than ten days, and generally after a longer interval. If then it were tetanus, it must have been in consequence of the lacerated wound made by the dog's teeth, not of that from the splinter. In the attack the disease also differed from what is usually observed in tetanus; there was no contraction or rigidity of muscle in the neck or back, and the muscles of respiration, which, in that disease, are seldom affected till towards its termination, were here considerably disturbed from the beginning.

To Dr. W. Y.'s question concerning the redness round the wound (which I had neglected, by some mistake, to specify in my statement); I answer, that the splinter penetrated so near to the bite that both wounds were included in the redness.

Dr. W. Y. asserts that the absence of inflammation in the lymphatics is a sufficient proof of the non-absorption of any morbid poison—but is inflammation a necessary consequence of absorption?

Dr. W. Y. complains that he cannot collect from my paper "whether the patient had any particular dread of fluids." Neither from the most attentive observation could I ascertain that point. The sight of fluids brought on the paroxysms; but whether they were produced by particular mental irritation, or by the experience of her physical inability to swallow, I was not able to determine.

I cannot accede to the Doctor's substitution of the word "shivering" for "great horror:" the patient certainly evinced more than a common repugnance to cold applications.

I have before observed that knowledge is best obtained by a careful notation of facts, and by the inferences thence deducible. If this be granted, what will become of the following position of Dr. W. Y.? "It is totally unnecessary to make any comments on the particular symptoms which distinguish the progress of this disease." Does the Doctor mean that it is useless to comment on the disease of hydrophobia in particular, or on diseases in general? But to quote farther, "whether they (the symptoms) were produced by a splinter of wood, or the teeth of a dog; whether the horror of fluids arose from a particular state of mind incident to the malady, or merely from the pain and difficulty of swallowing, the case under consideration is conclusive that hydrophobia is not a contagious disease, which is capable of being communicated, either mediately or immediately, from dog to man." What can the Doctor mean!!!

Dr. W. Y.'s ratiocination is not of the common order, but if the sentence signify any thing, it must be this; that in its investigation, neither the causes or the symptoms of the disease are worthy consideration; and then, without one

reason in support of his inference, he concludes from the case in question, that hydrophobia is not a contagious disease.

With the same intuitive glance (for he admits not of the vulgar support of proofs) by which the above discovery was made, does he in the next sentence proclaim that the "dog was not mad." But if in this instance the dog was not mad, how can it be thereby ascertained that hydrophobia is not a contagious disease? May not the Doctor's Irishisms give support to a certain knight-errant, who in his "righte merrie and conceitede tour," has advanced, that the only bull he heard in all Ireland, was from the mouth of an Englishman?

In the written account I received from the master of the dog, he states that she was carefully confined on her return home, on account of her diseased appearance, and from her having snapped at the children, (a thing quite unusual with her); and that, instead of being "infirm and exhausted," she was about a fortnight before she died as lively and playful as ever.

Another circumstance has lately come to my knowledge, that will tend much to prove that the animal was diseased.

A day or too previous to Mrs. Sharpe's accident, the dog was known to bite another in the neighbourhood, which, about a month afterwards, exhibited what I believe to be the true symptoms of rabies. The heavy appearance of his eyes, and snapping at every object during two days, first attracted notice. He then broke out from his master's yard, and ran wildly about the country for several hours. On his return he was closely confined, and died in five days from the attack. A howling of a very unusual kind was always followed by furious action, which continued for some time, and was succeeded by sleep. When he awoke the same phenomena were again exhibited. On the fourth day the howl

became gradually weaker, and during the whole of the last it had ceased altogether—the first three days he ate as usual, but during the two last he refused every thing.

I remain, Gentlemen, &c.

HENRY U. THOMSON,

Member of the Royal College of Surgeons, London.

Kensington, Dec. 17th, 1808.

Medical Reports of Cases and Experiments, with Observations, chiefly derived from Hospital Practice, &c. By Samuel Argent Bardsley, M. D. M. M. S. Ed. and M. S. London: Physician to the Manchester Infirmary, &c. &c. 8vo. pp. 336.

(Continued from Vol. I. page 465.)

The extracts already given from this interesting practical work will have satisfied our readers that Dr. Bardsley has not written without much consideration of his subject, and an attention to the opinions of preceding writers. If we do not always coincide with him in opinion, we have no reason to find great fault; and even when he advances nothing new of his own, he renders, by his remarks, the opinions of others more perspicuous, and supports them by additional facts.

As the subject of Hydrophobia at present fills so many of our pages, and excites so much the public regard, the following addition from Dr. Bardsley's publication, we should conceive, would be found particularly curious, and properly chosen to close this subject. It is called "The history of a case of Hydrophobia occurring 12 years after the bite of a supposed Mad Dog." It is introduced by the author's remarking that "the following case has a peculiar claim to attention, on account of the great distance of time, from the bite of a supposed rabid animal, to the appearance of the disease. It is, indeed, a difficult task, to ascertain a

fact of this nature; and especially, when inquiries are to be made from ignorant and prejudiced persons. As it is, however, a matter of the utmost importance to be established, no pains have been spared to gain every intelligence which the patient and his friends were capable of communicating. The result of the inquiry is in favour of the patient's repeated assertion: 'That he had never suffered the least injury from any animal; except the bite, inflicted twelve years since, by an apparent mad dog.'

"John Lindsay, weaver at Fearn Gore near Bury, in the county of Lancaster, aged thirty-six, of middling stature, and spare habit of body, and of a temperament inclined to the melancholic, was brought into the Manchester Lunatic Hospital, on Friday May the sixteenth, 1794, about three o'clock in the afternoon. He was immediately visited by Dr. Le Sassier, who obligingly communicated to me the following particulars: The patient expressed feelingly his sense of danger, from the persuasion that his disorder proceeded from the bite of a mad dog. He was desired to drink a little cold water, which on being presented to him he rejected, with every appearance of disgust and horror. Being again strongly urged to drink, he made the attempt, and with great exertion got down a small quantity of the liquid. He was perfectly rational, but appeared apprehensive of danger from the least noise, or approach of any person towards him. He expressed a desire to make water, and was quitting the room for that purpose; but no sooner had he approached the door, than he suddenly retreated, complaining of an unpleasant sensation he felt from the cold air, and particularly that it produced a convulsive twitching about his throat. To screen him from the effects of the air, when conveyed from the examining-room into the Hospital, an umbrella was held over his head, and his body muffled up in a wrapping cloak. As soon as he had got into his apartment, he ate some bread and cheese, but with difficulty: and re-

quested to be allowed to drink some butter-milk. He attempted to swallow this liquid, and in part succeeded; but not without the most violent struggling efforts, attended with distortions of his countenance, which remained slightly convulsed for some time afterwards.

A consultation of the physicians of the Hospital being called by Dr. Le Sassier, and the assistance of Dr. Percival, physician extraordinary to the charity, requested; the latter Gentleman, in concurrence with Dr. Le Sassier, (the rest of the faculty being out of the way,) entertained not the least doubt of this patient being afflicted with genuine Hydrophobia. As the disorder was far advanced, and might, indeed, be considered as nearly terminating, being the third day from the appearance of the symptom of Hydrophobia, little or no advantage could be expected from medicine. He was ordered, however, about four o'clock the same afternoon, to take a bolus composed of twelve grains of musk, two grains of opium, and six grains of camphor. Two drachms of strong mercurial ointment were also directed to be rubbed in, upon the throat and breast. I saw the patient, in company with the other physicians, about six o'clock the same evening; and we found him very willing, and sufficiently composed, to give a distinct account of the circumstances preceding the disease, and to describe his sufferings since its attack. The following particulars were collected: He has been industrious, sober, and regular in his mode of living; but subject to low spirits from the difficulty he found, at times, of maintaining a wife and six young children. His exertions, however, were in general proportionate to his difficulties. But of late, from the depreciation of labour, he found that the most rigid œconomy and indefatigable industry were not sufficient to ward off, from himself and family, the calamities of hunger, debt, and most abject poverty. The anxiety of his mind now became almost insupportable. As the last refuge for his distress, he applied, a few days

previous to the attack of his complaint, to the Overseers of his Parish for their assistance to pay his rent, and thereby prevent the seizure of his goods; but obtained no relief. Overwhelmed with grief and disappointment, he yielded to despair, resigning himself and family to their wretched fate. He was soon roused from this state of fancied apathy, by the piercing cries of his children demanding bread. In a paroxysm of rage and tenderness, he sat down to his loom on the Monday morning, and worked night and day, seldom quitting his seat, till early on the ensuing Wednesday morning. During this period of bodily fatigue and mental anxiety, he was entirely supported by hasty draughts of cold butter-milk, sparingly taken. Nor did he quit the loom, until his strength was completely exhausted. He then threw himself upon his bed, and slept a few hours. On waking, he complained of giddiness and confusion in his head, and a general sense of weariness over his body. He walked five miles that morning, in order to receive his wages, for the completion of his work; and on his return, felt much fatigued, and troubled with a pain in his head. During the night, his sleep was interrupted by involuntary and deep sighs—slight twitchings in the arms—and a sense of weight and constriction at the breast. He complained of much uneasiness at the light of a candle, that was burning in the room. On evacuating his urine, he was obliged to turn aside his head from the vessel, as he could not bear the sight of the fluid without great uneasiness. Being rather thirsty, he wished for balm-tea to drink; but was unable to swallow it from a sense of pain and tightness, which he experienced about the throat, when the liquid was presented to him. He suddenly exclaimed, on perceiving this last symptom, 'Good God! It is all over with me!' and immediately recalled to his wife's recollection, the circumstance of his having been bitten, twelve years ago, by a large dog apparently mad; which was flying from the pursuit of a num-

ber of people, on the high road between Warrington and Manchester.

"During the whole of Thursday, his abhorrence of fluids increased; and he now began to feel an uneasy sensation on being exposed to the air. The slight twitchings of his arms were also increased to sudden startings; attended with a violent agitation of his whole body. He had suffered much from his journey, being brought eight miles in an open cart. I perceived at this time (half past six, Friday evening) that his countenance expressed the utmost anxiety; his breathing was laborious and interrupted; and he complained of a dull pain, shooting from the arms towards the præcordia and region of the stomach. A livid paleness overspread his face; the features were much contracted; and the temples moistened with a clammy sweat. He suffered greatly from excessive thirst, and dryness of the mouth and fauces.

"An unusual flow of viscid saliva occasioned him to spit out frequently. He complained of a remarkably fetid taste in his mouth, and a loathsome smell in his nostrils. He ate some bread and butter, at his own request, but with great difficulty, as he was obliged to throw his head backward, in order to favour the descent of the morsel down the gullet. He was requested to wash down this solid food with some liquid; and he expressed a readiness to make the trial. On receiving a bason of butter-milk, he hastily applied it, with a determined countenance, to his lips; when he was instantly seized with so severe a spasm and rigidity of the muscles of the neck, that he was compelled, in an agony, to desist from drinking. Shortly after, he raised himself upon his knees in bed, took the bowl again into his hands, and by forcibly stretching his neck forward, at the moment he received the liquid into his mouth, and then violently throwing his head backwards, he succeeded in swallowing a small portion. He appeared highly gratified with the success of this effort, and the fortitude he had exhibited; and

exultingly demanded another draught of the butter-milk, as he thought he could conquer the difficulty he had hitherto experienced. But a violent return of the spasms in the throat and neck checked this attempt. These convulsions were terminated by the stomach discharging the liquid previously swallowed, highly tinged with bile. I perceived that he had conveyed a piece of orange under the bed-cloaths, which at intervals he applied to his mouth by stealth, and as it were unperceived by himself; for he constantly hurried it to his lips, when his attention appeared to be engaged on other objects. This stratagem did not succeed. No sooner had the morsel touched his mouth, than he was seized with convulsions about the throat, and a stricture at the breast. I saw him again, in consultation, at eight o'clock this evening. He had taken two doses of the bolus; and the ointment had been carefully rubbed in. He appeared rather more composed, but expressed great anxiety at the idea of being left alone. He courted eagerly the conversation of those around him; apparently from the motive of withdrawing his mind from the contemplation of his miserable state. The repugnance he felt at swallowing liquids, and the uneasiness occasioned by the attempt, he now considered as his chief complaints; and was determined to conquer the first by perseverance, and an undaunted resolution. His spasms seemed to be somewhat mitigated, as he got down a little milk-porridge with less difficulty than usual. A repetition of his medicines every three hours was ordered during the night. At nine o'clock the next morning (Saturday) he was visited again; and we learned that he had passed the night without a moment's rest, frequently shouting out with looks of horror, and sometimes wailing in broken and confused murmurs; but, on being spoken to, he always returned rational answers. He was now alarmed to a degree of distraction at being left alone. He examined every object with a timid and suspicious eye; and, upon the least noise of a footstep

in the gallery, he begged in the most pitious accents to be protected from harm. He had never offered the least violence to any one, since the commencement of the disease ; and even now, when the increased secretion of saliva occasioned him to spit out very frequently, he apologised to the bye-standers, and always desired them to move out of the way. I observed, he frequently fixed his eyes, with horror and affright, on some ideal object; and then, with a sudden and violent motion, buried his head underneath the bed-cloaths. The last time I saw him repeat this action, I was induced to inquire into the cause of his terror.—He eagerly asked, if I had not heard howlings and scratchings? On being answered in the negative, he suddenly threw himself upon his knees, extending his arms in a defensive posture, and forcibly throwing back his head and body. The muscles of the face were agitated by various spasmodic contortions;—his eye balls glared, and seemed ready to start from their sockets;—and at that moment, when crying out in an agonising tone—'Do you not see that black dog?' his countenance and attitude exhibited the most dreadful picture of complicated horror, distress, and rage, that words can describe, or imagination paint !—The irritability of the whole system was now become excessive. He discovered the highest degree of impatience on the least motion of the air. Every action was accompanied with that hurry and inquietude, which marks an apprehension of danger from surrounding objects. The oppression of the præcordia was evidently encreased; and, when he gasped for breath, the whole body was writhed with convulsions. His speech was interrupted by convulsive sobs. The pulse was tremulous and intermitting; and, at some times, so hurried as not to be counted. He had frequent retchings, and brought up occasionally small quantities of a yellow liquid. Solids were now swallowed with excessive difficulty; and the attempt always produced strong spasms about the neck and breast. At ten

o'clock (the same morning) we met in consultation; when the medicines were ordered to be repeated every two hours, with an increase of the dose of opium, from two to three grains. Half an ounce of strong mercurial ointment was ordered to be rubbed in over the surface of the body, and a sponge dipped in vinegar to be constantly held to the mouth and nostrils. At four o'clock the same day, the consultation was renewed. We found the patient had been able to swallow his boluses without much difficulty, and had drank several times with infinitely more ease than usual; but the fluid had been immediately rejected by the stomach, and had come up, deeply tinged with yellow. His countenance exhibited a cadaverous aspect. His voice was hoarse, indistinct, and faultering. He complained of a fixed pain at the region of the stomach; which he had felt, more or less, during the disease. The pulse was feeble, and scarcely perceptible. He swallowed some tea with less difficulty than had been observed since his entrance into the Hospital. His dissolution was apparently drawing near; yet it was deemed advisable to order his body to be rubbed with warm oil; and one ounce of that fluid to be taken every half hour, or as often as the stomach would bear it. His mental faculties at this period suffered very little derangement; for although, when not attending to external objects, he would utter some incoherent sentences; yet, the moment he was spoken to, he was perfectly collected, and returned rational answers. At half past four o'clock, he submitted willingly to have his body rubbed with the oil, and for that purpose sat down upon the side of the bed; when he was seized with an instantaneous convulsion, threw himself backward—and expired without a groan! An immediate inspection of the body would have been a desirable circumstance: but we were obliged, (however reluctantly,) from unavoidable impediments, to defer the dissection till the following morning. Accordingly, on Sunday morning, about ten o'clock, the

body was opened in the presence of one of the physicians, myself, and two of the surgeons belonging to the charity. I have to regret that the examination did not extend to the brain; and indeed, that a more minute investigation of the morbid appearances, accompanying this fatal malady, did not take place. But, such was the peculiar horror inspired by a view of the progress and catastrophe of the disease, that the accustomary dread of danger arising from any examination of an hydrophobic subject was increased, by this instance, to a tenfold degree. Besides, the well-known prejudices entertained by the country people, against the opening of dead bodies, rendered us anxious to finish the inspection before the arrival of the patient's friends, who were hourly expected. In the cavity of the thorax no unusual appearances were discovered; except, that the surface of the lungs appeared of a darker hue, and more distended with blood than usual. No inflammation appeared on an inspection of the fauces; nor were the muscles of the larynx or pharynx in the least discoloured. The stomach and œsophagus were removed from the body, and subjected to particular inspection. A longitudinal incision was made through the whole cavity of the œsophagus, but not the least marks of disease were discovered. Upon opening the stomach, evident traces of inflammation were observed. It commenced at the superior orifice, and was there confined to small and irregular spots of a dark red colour; and might also be traced in a linear form, and of a brighter red, along the curvature of the stomach, terminating at the pylorus in large and irregular spots of a gangrenous appearance. The contents of the stomach did not exceed three ounces; and consisted, chiefly, of the medicines that had been swallowed, mixed with a dark coloured fluid. All the other viscera of the abdomen exhibited no marks of disease."

This case is followed by a number of scientific observations on the disease, which shew much noting on the part of the

author, and are detailed with judgment and apposite elucidations.

Modern Medicine: containing a brief Exposition of the Principal Discoveries and Doctrines that have occasioned the recent Advancement of Medical Philosophy, with Strictures on the present State of Medical Practice, and an Inquiry how far the Principles of the Healing Art may become the Subjects of unprofessional Research: By David Uwins, M. D. Member of the Royal College of Physicians, London; and Author of the Medical Articles in Dr. Gregory's Encyclopædia. London, 8vo. pp. 200.

The title-page of this work promises somewhat more than it will be found, on perusal, the author performs. The model of his medical style seems to be the same as that employed by Dr. Reid in his Reports, and which we by no means consider as constituting the chief part of his merit.

His work is begun by a sketch of the progress of medical discovery, from the origin of the science to the Edinburgh school. But this sketch is so far defective as to leave omitted the name of Celsus, an author of so much merit; and Gaubius, the very writer who first noticed the *solidum vivum*, is totally forgotten. In this detail, Dr. Uwins seems to have been at first a well-meaning Brunonian, who has abjured his errors, having tried this system, so fascinating to young men; but having had judgment enough to give it up, when he found its principles did not successfully apply in practice; and we cannot but consider his objections to the Brunonian doctrine one of the best chapters of his book. We shall select a part of it for the reader's information.

"In remarking on Brown's doctrines," says our author, "it may be observed in the first place, that should we concede to his position, that fibrous excitement is a necessary

and universal preliminary to every other change operated upon the living body, such concession could not be made without the qualification of difference in the *kind*, as well as in the degree of action or excitement thus produced. Who but a determined systematic would contend for the identity of agency in opium and vitriolic æther? Both the one and the other stimulate or excite; granted, but do we find no variation in the mode in which their exciting powers are developed? In fact, the ad absurdum extreme of inference from Brown's fundamental datum would be the reduction of all medicines into one; for, were there no difference but in energy between opium and æther (to go on with our examples), the one by an increase or decrease of dose might unquestionably be employed to the total exclusion of the other.

"A second error, which our author's generalizing disposition led him to embrace, respects the universality of excitability, or the equal distribution of this principle, throughout the living system, for it is a fact that one organ can be excited while another is depressed, and that too by the same means; thus we find it admitted by those even who are reluctant to question the authority of Brown, that foxglove, while it reduces the actions and power of the arterial, excites and invigorates the absorbent vessels.

"Thirdly, our theorist, in denying the direct agency of external powers upon the fluids, and, but through the intervention of excitability, the solids of the system, was either ignorant of, or overlooked several facts in the œconomy of animated nature, to which we shall afterwards refer. It will be seen that some substances, which may not have any sensible or immediate agency upon the excitability, shall become by a species of chemical attraction, component parts of the living frame; this, however, by no means in that mode nor to that extent which was formerly imagined, and is by some speculatists at present conceived."

In his explanation of the chemical theory of medicine, we apprehend defects exist in his account of heat. But still, on the whole, we are inclined to give it commendation. His observations on digestion, drawn from Mr. Abernethy, are also worthy of perusal ;—the remaining parts of the work we shall reserve for our next number.

II. SURGERY.

From the variety of its subjects, Surgery opens a wide field for observation. Its principles rest more on detailed facts than general doctrines. Hence it is more practical than medicine, and less subject in its application to innovation. The value of individual cases in this department are accordingly more to be appreciated.

TUMOURS.

From its numerous species, one of the most complicated forms of disease to which surgical aid is applied is the class of Tumours; and of these, some of the chronic kind are the most difficult in their management. A remarkable chronic tumour, which he terms pendulous, is thus described by Mr. Carwardine, of Thaxted:

"Abraham Perry, æt. 73," he observes, "about forty-two years ago, first perceived a small tumour, situated, according to his description, upon the outer edge of the pectoral muscle, where it forms the margin of the axilla. It was like a little hard gland, without any pain in its substance; but his attention was excited to it by a constant and very troublesome itching over its surface. This tumour increased slowly for about twenty years, and had then acquired the size of a small orange, when it appeared to quit its base, or rather to be elongated from it by a slender peduncle, and gradually became pendulous; in this state it augmented

with increased rapidity; the itching subsided, or was only occasional, and less in degree. He never experienced any thing like acute pain, but a sort of dull aching sensation, which might be supposed to arise from the pendulous weight of so large a mass; yet this sensation was rather augmented than lessened when the tumour was suspended by a broad band slung round the neck. However, the pain or inconvenience of any kind which he experienced was so slight, that he usually worked as a husbandman till within a few months of his decease, though at no advanced age.

"The first time I saw the subject of this case was about two months since, when I was sent for on account of an illness arising from some biliary obstruction, which in the end proved fatal. I then obtained the foregoing account, to which I shall now add the result of my own examination, and a slight sketch of the tumour, which will convey a sufficiently accurate idea of its form and situation.

"The neck or peduncle of the tumour was very small, though being enveloped in a considerable quantity of loose integument, which presented a flattened surface in front, it appears rather large in the drawing. After descending a few inches, it suddenly enlarged into an irregular tuberculated mass, presenting to the touch the sensation of variously sized, and irregular formed, portions of bones or cartilage, loosely connected by fat and cellular substance. The integuments were of the natural colour, and extremely loose over the whole body of the tumour, but particularly over its neck, where they might be gathered up into numerous folds. The pulsation of one small artery was perceptible in the neck of the tumour, and a large varicose rim meandered over its surface. Handling gave no pain, and its sensibility was so slight, that although the skin was abraded to some extent at the lower part of the tumour, he had not perceived it till it was pointed out to him. This peculiar hardness, as of portions of bone in the body of the tumour, had

only been perceptible within these few years; and Mr. Cribb, a professional gentleman of Stortford, assures me, that when he examined it about seven or eight years ago, its texture was perfectly like soft common adipose sarcoma. The circumference of the peduncle was five inches and three-quarters; of the largest part of the body of the tumour nineteen inches, and its length, from the edge of the pectoral muscle, from whence it appeared to arise, to its lowest extremity, was fourteen inches.

"There was a small tumour on his right arm, which, he says, is precisely what he remembers the large one. It has the feel of a common fatty tumour, and has a very troublesome itching on its surface.

"On the 6th of September, 1808, the man died, and a few hours after his decease, I proceeded, with my partner, Mr. Clarance, to examine the tumour. On making an incision through the integuments, I began where I conceived the tumour to have originated, and continued down to the lowest part of it; I found that it had its rise considerably higher up, and tracing with the knife I found a slight sheath of condensed cellular membrane arising from the clavicle. This sheath arose from the bone by a few shining tendinous fibres, which were soon lost in the cellular substance; it then became gradually thinner and looser in its texture, and over the remaining part of the tumour was nothing more than a very slight condensation of cellular membrane. This sheath of the peduncle contained two, nearly cylindrical, portions of fat, loosely connected, somewhat resembling what Morgagni has described in Adipose Tumours (Vide Epist. L. Art. 23, et seq.); they increased a little in size as they descended, and, about six inches from their origin, enlarged suddenly into many irregular and distinct lobes of various sizes; these lobes were loosely connected by cellular membrane, so that they could be easily separated by the fingers; but their chief connection was by distinct flattish

white tendinous bands, most accurately resembling a large plexus of nerves, except that they were not separable into distinct fasicula of fibres like nerve. Nothing of this tendinous substance was observed about the peduncle, but the chief great plexus was situated in the middle of the tumour, and sent off a branch, or branches, to each lobe. A few of the branches, as they approached the lobes, became ossified, and in that state entered the body of the lobes, and were accompanied by some very trifling vessels; indeed one small artery, arising from the subclavian, was all that supplied the whole tumour. Some of the lobes were still in an adipose state, like the neck of the tumour; others were of a glandular structure, with numerous small cells, containing an oily fluid, which escaped as soon as they were cut into; others had formed a thin shell or case of hard bone, which contained an unctuous kind of earth, exactly resembling, in colour and consistence, fuller's earth; and in these the tendinous bands above described were ossified before they entered the lobe. The largest of these masses of earth, surrounded by its bony case, I have preserved; and sent to Mr. Abernethy; it weighs about a pound and three-quarters. All the lobes were surrounded by more or less of the original fatty matter of the tumour; the whole mass might weigh perhaps nine or ten pounds.

"What appears to me most worthy of remark in the foregoing case, is the *late* deposition of bone, &c. A tumour is formed like most adipose tumours, in the common adipose substance of the body, having a very small supply of blood-vessels, and these vessels, as far as can be judged from the history and appearance of the disease, took upon them the office of secreting fat; but, after a great length of time, they assume a new action, and deposit bone and other earthy matter of an anomalous character.

"There appeared nothing of a malignant nature in either of the tumours; they neither communicated their actions to

the neighbouring parts, nor insinuated disease through the medium of the absorbents.

BURNS.

One of the most important subjects of this department, which has long divided the sentiments of practitioners, is the proper management of Burns, or accidents from fire, and under what circumstances, either the cool or warm regimen is to be preferred. In slight cases, the former is certainly preferable; but, in those of more serious consequence, the stimulating terebinthinate applications have considerably the advantage, by procuring more speedily a cessation of pain, and giving permanent ease by reason of an earlier secretion of pus. These are important advantages attached to Mr. Kentish's plan; and, as observed by Mr. Purton, of Alceston, to use his own ords:

"I have not been under one single instance of embarrassment, but on the contrary, have been uniformly charmed with the *immediate* ease produced; and several of my patients, who have had opportunities of trying both methods, voluntarily give it in favour of the new one, and that in terms of the highest eulogy. It is surely unnecessary to add more; what I have stated are facts. Cessation from pain is *almost instantly* produced by the terebinthinate application; but by the cooling treatment, it is necessary *often* to have a *constant renewal* of cold, for hours, before similar effects take place. I have been in the habit of using the ol. terebinth. cold, mixed with ol. lini, in the proportion of two parts of the former to one of the latter; and from my experience, applying it cold, has been attended with more beneficial effects than hot, although I can readily perceive that in bad cases of burns from metallic substances, where deep eschars are formed, that heating the oil might be attended with more advantage, but I have not yet had opportunities enough in my own practice to establish the fact."

BLEEDING.

However easy and trifling the practice of Bleeding, as commonly practised, appears, yet in many instances it is known to be succeeded by the most serious consequences—even death itself. These consequences are happily very rare, and physiologists have been puzzled in such cases to ascertain on what particular organic lesion induced by the operation these symptoms so alarming could depend. The opinions on this subject may be reduced to four heads, each having its particular favourers, who support it by a variety of arguments. These are, 1st, the pricking of a tendon; 2dly, of a nerve; 3dly, a bad constitution; or, 4thly, peculiar inflammation.

The first of these opinions was formerly the most general, and the situation of the vein commonly opened in this operation favoured it. But when we consider that the same accident has followed bleeding in other situations, where no tendon or aponeurotic expansion is placed, we cannot properly refer it to this cause. Besides, even tendons themselves have been torn and lacerated, without such consequences succeeding.

The pricking of a nerve, therefore, may be most readily suspected, and it explains the symptoms of this affection more easily than by any other supposition. The first symptom felt in this case is a smarting at the orifice made, which is succeeded by a tingling pain shooting from the orifice to the hand, and in the other direction also to the shoulder. These symptoms increase, affecting all the connecting muscles of the arm. An erisipelatous inflammation, or efflorescence, also generally appears in different parts about the orifice, which comes to discharge an ichorous matter. Convulsive catchings of the member at last succeed, and even a tendency to tetanus has been known to take place; death at last puts an end to the sufferings of the patient. From this history, then, it seems evidently a nervous affection, for the

nervous symptoms are prior to those of the inflammation; and what puts it beyond doubt is, that even where the symptoms have already gained their utmost height, the enlarging the wound, so as entirely to divide the læsed nerve, has immediately relieved the patient, and soon effected a cure.

The third opinion, or its arising from a bad constitution, cannot be admitted, as not accounting for the quick progress of the symptoms, for the effects of a bad habit are slow in their operation. Besides, the same person has been afterwards bled repeatedly without any such accident occurring.

The last opinion, or its depending on a peculiar inflammation of the vein, is very ingeniously supported by Mr. John Hunter. To this he was led by a similar accident occurring to horses after bleeding, the neck, the part where they are commonly bled in, swelling, and occasioning at last death. On tracing the effect of this accident by dissection in these animals, he observed that the cavity of the vein was inflamed, and that the inflammation had spread along its internal surface to the chest—sometimes to the heart itself. From observations, also, on the human body, he finds that such inflammations of the cavities of veins frequently occur, and he is induced, therefore, to consider these as the cause of the various symptoms that arise.—But were this the case, the symptoms of inflammation we should expect to find much more diffused than what they commonly appear. Nay, the symptoms of the disease are often uncommonly severe, while those of the inflammation are slight; and if Mr. Hunter's reasonings were true, they should bear always a proportion to the state of the inflammation. Besides, the enlargement of the orifice should, in this case, also be of no service; it should exasperate the symptoms, and increase the inflammation: but the patient is found often immediately relieved after its performance. Mr. Hunter's alleging that the nerves wounded are small and unimportant, is going too far. It is in this case not talking like himself. Who is so ready to attribute great effects

to slight causes as he. Small, indeed, they may be; but as to their being unimportant, that does not so readily follow; for every person who has paid proper attention to the phenomena of the nervous system, must know that the smallest fibre of a nerve, when injured under certain circumstances, will communicate irritation from one branch to another in a most extraordinary manner. That nerves are divided in many of the common operations of surgery, is certain, but as to their being merely pricked is doubtful. It is the partial division of a nerve which we contend is attended with these alarming effects.

Though the enlargement of the orifice admits of a ready cure, it would be of importance if we could, without cutting, find any application equally successful, and which, by inducing a paralytic state of the nerve, might remove the symptoms. We know that, in the celebrated case of Charles the ninth of France, treated by Ambrose Paré, warm, stimulating applications effected a cure. We know, also, that oil of turpentine is very efficacious in the puncture of a tendon; and we know still further, that volat. alkali dropped on the sciatic nerve of a frog will render it paralytic. From these facts, then, some experiments may be tried to supersede the necessity of an operation.

COMMUNICATION ON WHITE SWELLING OF THE JOINTS, AND ON THE TREATMENT OF CATARACT, BY R. REECE, M. D.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—THERE is no disease which is more to be lamented, and to which the aid of surgery is applied with less success, than the affection of the joints known by the name of white swelling. This disease has been commented on by lecturers and authors, as existing under two species, distinguished by the appellation of scrofulous and rheumatic. The propriety of this division I am much inclined to call in question. Rheumatism, I admit, in a scrofulous habit,

may prove an exciting cause of white swelling, but as soon as the white swelling commences, the slight redness attendant on rheumatism of the skin, and in some degree the pain, abate. The rheumatic affection of the other joints also gradually subsides, while the white swelling increases. The different symptoms noticed by authors, as distinguishing one species from the other, arise only from the disease commencing in different parts of the joint. As rheumatism affects principally the ligaments of the joint, the white swelling of course is likely to commence there, and spread to the bone and cartilage. When the disease is brought on by any accident or inflammatory fever, it commences on the interior of the joint and spreads to the ligaments.

Whether it commences in the ligaments which are the seat of rheumatism, or the interior part of the joint, the disease, in all the cases I have examined in the latter stage, exhibits the same morbid structure, *viz.* partial collections of scrofulous matter, &c. &c. Rheumatism, therefore, has nothing more to do with white swelling than as an exciting cause. White swelling is often followed by small-pox, strains, and inflammatory fevers, and these with equal propriety may be termed variolous white swelling, &c. In the same scrofulous habit catarrh often produces phthisis pulmonalis.

From White Swelling I am induced to make some observations on another disease not less troublesome in its cure.

Of the Absorption of Cataract by the internal use of mercury we have had the most indisputable evidence. The following cure, which has occurred in my own practice, proves that its absorption may be produced by external irritation.

Admiral Henry having a cataract in each eye consulted Mr. Ware, who recommended their extraction. The admiral agreed to give the operation a trial on the left eye, and if it succeeded, he promised he should shortly after operate on the other: unfortunately, such a degree of inflammation and thickening of the cornea succeeded, as entirely to destroy

vision, and in consequence he would not submit to any operation being performed on the other eye. The admiral having cured himself of many obstinate attacks of rheumatism and gout by severe friction, and occasionally pounding the parts affected with a wooden hammer, resolved to make the experiment on the right eye: after persevering with great fortitude in this plan for about a month, he found that he could discern a luminous body, and by continuing the practice a few weeks longer, the diseased lens gradually diminished, and the gallant admiral is enabled to read small print. By the same practice he has also effectually cured himself of gout, to which he had been many years a martyr. There is a great difference of opinion existing between surgeons and oculists concerning the advantages of depression and extraction of the lens. Upon a fair detail and comparison of the advantages and disadvantages attending each, the preference is justly due to depression, so far as the patient is concerned, although extraction is more beneficial to the operator. The arguments adduced by Baron Wenzel, and the objections to the operation of depression, must appear to every experienced surgeon invalid, and not the result of *unprejudiced* experience, or even of a candid regard for truth. That able and ingenious surgeon, Mr. Hay, of Leeds, in his invaluable publication, entitled "*Practical Observations on Surgery*," very ably and satisfactorily confutes the arguments employed by Baron Wenzel and Mr. Ware, in favour of extraction; and after thirty years practice in diseases of the eye, states that *experience* has led him to prefer the mode of depression. If the operation of couching were performed by a pair of scissars, of the size of the usual needle, it might be divided after the depression into the inferior part of the eye, before the instrument be withdrawn, which, in my opinion, would not prevent its rising in the way of the axis of the eye, but ensure its dissolution and absorption. I am, Gentlemen, your obedient Servant,

RICHARD REECE

COMMUNICATION ON TINEA CAPITIS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—THERE are many diseases, apparently simple, which much perplex a surgeon in his treatment of them. I know of none more so than Tinea Capitis, or Scald-Head. In obstinate cases, I have found it resist every local application of the most powerful kind, whether in the form of lotion or liniment; and it has only yielded at last to the radical cure of extracting most of the hairs by the roots. From this obstinacy of the disease, I have long suspected its being rather a constitutional than local affection; and that in all cases this circumstance should be held in recollection. Small doses of calomel do not succeed here in the worst cases; a proof that it is not (if sometimes) always connected with a specific cause; and I would rather attribute it to a scrofulous origin, and keep the indications employed for the treatment of this last disease in view. Since I proceeded on this plan, and administered steel internally in liberal doses along with the usual local remedies of the stimulant and gently escharotic kind, I have never failed in a single instance. It is clearly a disease of debility; and whether this debility is of a peculiar species, or not, strengthening the habit by the use of powerful tonics will tend to remove the cause, and allow the local remedies to have their full influence. If this suggestion should lead any of your correspondents to take up the subject, and point out a preferable plan from their own experience, they will do a service to most practitioners, and to none more than to,

Gentlemen, your obedient Servant,

Cambridge, Dec. 5, 1808. A CONSTANT READER.

P. S. Tinea often occurs in adults. Where it does, it is generally connected with a siphylitic taint, and yields readily to small doses of calomel internally, and the following liniment, *viz.*—Equal parts of the tar ointment, the citrine (nitrated mercurial) ointment and the sulphur ointment regularly employed.

Practical Observations on the Nature and Cure of Strictures in the Urethra. By William Wadd, Member of the Royal College of Surgeons in London. 8vo. pp. 88. *3s.*

This subject is one, which, from its frequent occurrence, and from being one of the most profitable kind to the practitioner, has engaged the attention of a great number of surgeons, and even formed a separate line of practice. Daran endeavoured to secure it by his idea of a medicated bougie; and Home and others by the application of caustic. Lesser authors have followed the steps of these two in their different methods, and the present work is a bumble imitation of his predecessors in favour of the bougie over the caustic. In the present work we accordingly find nothing very new or striking. It is a pamphlet written as an advertisement, and can claim no higher merit. But we shall enable our readers to judge for themselves by a few extracts from the most interesting parts of this dissertation.

One effect of the application of caustic is often to produce a troublesome and dangerous hæmorrhage, and the observations of the author on this subject are thus introduced:

"It has been said that the hæmorrhage, which sometimes ensues after the application of caustic, is more alarming than really dangerous. For the extent, however, to which it continues, I need only refer to Mr. Home's treatise, and the common experience of every surgeon who has used the caustic. In the perusal of Mr. Home's works—"the parts bled freely,"—"it continued for hours;"—"the quantity lost we supposed to be several pounds;"—are expressions to be met with in several pages; and in one case it is observed, "the bleeding and pain continued several days." These are circumstances that are not regarded as objections to the practice; and the indifference with which they are viewed, is considered by Dr. Andrews, as the result "of cool and steady conduct." He admits, however, "that if it (hæ-

morrhage) was, *in a great proportion of cases*, to terminate fatally, it would then be a strong objection to the practice; but this (in a great proportion of cases) we do not find by any means to be true." This would, indeed, be a very strong argument against the practice; but admitting, as may be fairly inferred even from this account, that some instances have terminated fatally, surely, it is at least a strong objection, and enough to justify Mr. Whately in complaining of the levity with which these objections are treated, as well as expressing his astonishment, at the coolness with which a surgeon views a chamber-pot full of blood, and the ease with which he calls for another. Mr. Carlisle speaks of it as one of the most dangerous consequences following the application of lunar caustic, and mentions a case in which the hæmorrhage continued seven days; in the two first the patient lost four pounds of blood, and nearly as much afterwards.

"The frequency of this occurrence, (which from the structure of the corpus spongiosum, and the thinness of the partition interposed between that, and the mucous surface of the urethra, is accounted for,) in addition to the various circumstances already enumerated, long since determined me to trust to milder means: and, fortunately, I have not to lament a fatal termination in any instance from this cause; yet I have to recollect much painful anxiety from the apprehension of it. In one case, after the eighth application of the caustic, on withdrawing the bougie, I was instantly covered with blood, which came out with a jet, nearly equal to the flow of urine. I must confess, whatever those accustomed to such accidents may think of it, that I was greatly alarmed; and as it happened in my own house, it was the more embarrassing: pressure and cold applications were used in vain; and it was some hours before it became sufficiently moderated, to allow the patient to be carried home in a sedan chair. The bleeding continued, at inter-

vals, for several days; and it was five months before the patient, who was foreman in a manufactory, recovered his strength sufficiently to resume his station. In another case, repeated hæmorrhages had taken place, but had generally ceased after a few hours. One day, however, it continued to flow so copiously, that I was sent for. At the same time Mr. Heaviside was called in. Iced water was recommended, and pressure made on the part; by these means the bleeding was at length stopped. The man remained in a very feeble state for a long time, nor did I think it prudent to use the armed bougie on him afterwards. I could enumerate a great many instances where the hæmorrhage equalled what is related of the preceding cases, were it necessary; but the fact is too notorious to require it. Of its importance, every man can judge for himself. Thus much I will say, that however far habit may teach a surgeon to regard these circumstances with indifference, he will not so easily succeed in making the patient, or his friends, believe there is no danger, and that extreme debility is a matter of no consequence."

The principle of the bougie being the one he contends for in the cure of stricture, he supports it by the following reasoning:

"It is by patiently persevering in gentle means, that success is to be secured or expected. The bougie should be increased in size according to the facility with which the stricture dilates, and the ease with which the patient bears the dilatation. If the parts are very firm, or very irritable, the increase of the size of the bougie should be slow, gradually stealing upon the parts, and allowing them to adapt their structure to the increased size. This is well expressed by a French writer, who describes this gradual stealing upon the parts, as effected by "little and little." "La meilleure méthode est d'introduire dans la

verge des bougies qui par leur volume et leur fermeté puissent écarter à peu les parois de l'urethre, et en même tems ramollir et rélâcher ses fibres."

"With respect to the time a bougie ought to remain in the passage, that must be determined by the feelings of the patient; nor should it be laid aside for some months after it passes with facility: "quoiqu'on urine à plain canal, il ne faut pas laisser de continuer l'usage des bougies tous les jours pendent quelques heures, ensuite toutes les semaines, et enfin tous les mois."

"The good effect of stretching a constricted part is frequently witnessed in contractions of the œsophagus and rectum. A woman applied to me on account of an obstruction in her throat, producing a total inability of swallowing any solid substance; of which complaint her father some years before had died. With a view of knowing in what part of the œsophagus the stricture was, a probang was introduced. When it arrived at the obstacle, the woman was very desirous it should be pushed through by force. Several attempts were, however, made in vain: at last the woman declared she felt the part give way, when she applied her hands to the probe, and forced it through. She was afterwards furnished with a proper bougie, by the daily and frequent use of which in a few months she became quite well. I have seen several cases, of a similar nature, considerably relieved by these means. Mr. Home records one case of a lady, nineteen years of age, who was perfectly cured by it. Mr. Samuel Sharp was of opinion, with many others of equal character, that the mere stretching of a constricted part was not only equal to procure an abatement of symptoms, but to effect a cure. Speaking of obstructions of the urethra, he observes, "that it is very remarkable, in regard to many of these strictures, that the symptoms arising from them shall be extenuated by acting against the stricture, that is to say,

by introducing a bougie big enough to distend the urethra, the painfulness of the stricture shall cease and the strangury shall abate, so that a man who is accustomed to make water every hour, shall, by wearing a bougie, retain it three or four hours." But, perhaps, the most unexceptionable authority is Mr. Hunter: every advocate of the caustic practice must pay deference to his opinion, and more decided language need not be sought. He expressly states, "*that if the case is such as to admit the end of a small bougie to pass, let it be ever so small, the cure is then in our power.*"

Having endeavoured, by all the usual arguments, to confirm the superiority of the treatment of strictures by the bougie, the pamphlet is wound up with the following conclusions; and then the *finale* takes place by the relation of a certain number of cases:

"From the complex nature of strictures, it must surely be admitted by every unprejudiced mind, that even presuming the situation of a stricture to be precisely ascertained, each different form of this disease presents difficulties that must, with every improvement, render the direction of the caustic to the exact spot, a matter of great uncertainty. If then this end is still unaccomplished, the observations of Mr. Sharp remain in full force: "The objections," says he, "to the use of caustics, were the difficulty and almost impossibility of directing them, so as to eat through all the diseased parts of the urethra, without destroying the sound part; the impracticability of *preventing the urethra from contracting when it healed, as much, if not more*, than it was at the time of employing the escharotic: and lastly, the pain was so excruciating, and perhaps the application so poisonous, that immediate mortification of the scrotum, penis, and bladder, were sometimes well known to ensue: upon these accounts, the use of escharotics seems to have been entirely rejected." There are few, I believe, who will not think this was sufficient ground for abandoning them; and viewing the fairest representations of all the improvements, suggested in the applica-

tion of escharotics to the diseases of the urethra, must we not still agree, that " ces rémédies enflammoient, rongeoient et ulcéroient ce conduit—et bien loin de procurer du soulagement, après, la cicatrice, le conduit de l'urine se trouvoit encore pluf étroit." That there are circumstances in which the application of the caustic may be attempted as an experiment, and under certain modifications, I am ready to admit; but I believe those cases to be very few, and the prospect of success, as far as regards the cure of stricture, to be very precarious. Here, as in many other situations, where there is doubt as to the probability of success, and where the mode of cure proposed is both painful and hazardous, the patient *only* ought to decide. It is for him to make his election, whether he will go through the new rough road, instead of the smooth old one. Every young practitioner will do wisely to act on this principle; for one unsuccessful operation may be more painful to his feelings, and do more injury to his fame and fortune, than an hundred successful cases can repair.

" Thus far I have endeavoured to shew, that the use of the common bougie should be considered as a leading principle in the cure of every description of stricture in the urethra. " It requires patience, coolness, and perseverance. If the surgeon can make any progress, though slowly, he must be contented. If, after the exertions of many days, he once gets through, he will be compensated by seeing the ease and comfort of the patient, and the pleasing prospect of being soon at the end of his labour." I will conclude with applying here, an observation used by Mr. Whately on another occasion. " If, therefore, by this easy, safe, and mild method of treatment, relief can occasionally be given to the close of life, without the patients suffering much inconvenience or pain from the disorder, it is certainly more advisable to pursue this plan of treatment, than to make use of a remedy, which has in some instances produced even fatal consequences."

In all this there is nothing more than what we knew before. It is, in fact, only an old song set to a new tune. But with respect to this disposition of stricture to recur, we may remark, that it may be considered often as a constitutional disease, to which every passage or outlet of the body lined with a secreting membrane is more or less subject. This disposition to stricture is equally conspicuous in certain persons, as the tendency to warts and other excrescences of the skin. Hence it occurs in the passage to the stomach, in the intestines, and even in the passage to the lungs. It is this constitutional nature of stricture which at all times gives it a tendency to return, and which accordingly recommends the means of cure employed to remove it to be occasionally used to prevent a relapse. In every constitution, stricture, we conceive, may be produced by the excitement of general irritation, if the original symptoms are in that degree to produce a deposition of coagulable lymph into the cellular membrane, which is not afterwards absorbed. But where stricture arises, without any previous venereal excitement, the constitutional disposition or tendency to it must be strong; and here, though a cure is effected, a relapse is always endangered.

III. MIDWIFERY.

This department of the profession, as observed by an ingenious correspondent in a former number, unites equally the business of the physician and surgeon. The diseases of the female in pregnancy, and after parturition, are often dangerous, and demand the utmost nicety in the prognosis respecting them as well as in their management. The operation of labour itself is often perplexed and complicated, and requires promptitude, decision, and manual action, in extricating the female from her unfortunate situation. It differs, however, from surgery so far, that, while in the operations of surgery, you have the advantage of the eye

to direct the use of your instruments, in midwifery you must trust entirely to the feel, so that the difficulty of operating is increased. This difficulty of operating has led, at different periods, to the invention and rejection of a variety of instruments. But in midwifery, the *time* of operating is perhaps of more consequence than the form of the instrument. Hence, as this point has been more completely understood, the use of instruments has been lessened, and apparent difficulties trusted to the management of nature. That midwifery was originally practised by the illiterate, who were only acquainted with the operation of labour, is clear, when we find, in all the authors of a prior period, that, under particular circumstances, the calling in of a physician is always advised. On the contrary, at present the physician is more apt to take the advice of the accouchcur, than to trust to his own opinion on female diseases.

PUERPERAL CONVULSIONS.

Of the diseases which perplex the obstetrical physician, none is more perplexing, embarrassing, and uncertain in its issue, than Puerperal Convulsion; and the following cases by a Derby practitioner, which have lately appeared, will confirm our opinion on this head.

" In the vast and gloomy catalogue of diseases," it is observed, " to which the human frame is liable, there is none so replete with terrors, so inconceivably dreadful, as this affection; and none that requires nicer management and skill, and more boldness and promptitude in practice. I allude to those cases of it which occur after delivery, or during the time of actual labour."

" That this disease depends upon pressure of the brain from extravasation, or from over-distention of its vessels, producing inflammation, and not from *nervous irritation*, is, I believe, a truth, that requires more generally to be understood."

" It is no difficult matter to distinguish a disease from its

symptoms when it exists, but it is a knowledge of the causes that must dictate a proper and effectual mode of treatment. Epilepsy is a disease we are all of us familiar with, but we know nothing of its causes, and, consequently, as little of its cure. This, certainly, then, can be an object of no small moment, as it may frequently, if not always, enable us, by timely care and proper management, to arrest a disease in its progress, which, when it occurs, is so fatal in its consequences.

"The two following cases, which have lately come under my inspection, may serve to throw some light upon this important subject.

"Case I.—A young woman, aged 19, had a difficult though natural labour of her first child; the pains were violent and protracted, which continued for eight or ten hours, when she was safely delivered by a respectable midwife. In the latter stage of the labour, she complained of pain and giddiness in the head; and as soon as the placenta was expelled, she sunk into a comatose state; and in ten minutes was seized with convulsions. She had three violent paroxysms, succeeded by slight intermissions; and in five minutes after the last, she died with every symptom of apoplexy. In this case, nothing was done, as I only arrived in time to see her expire; which was in about half an hour after she was delivered.

"Case II.—A woman, advanced in years, was safely delivered of her second child, which was many years subsequent to her former. She was in labour for twelve hours, the latter part of which was unusually difficult. She appeared tolerably well, but complained of pain in the head, which gradually increased, and she became delirious; in which state she continued for two hours, and was seized with convulsions. Before I saw her she had had thirteen fits in rapid succession, which left her in a state of complete torpor, and she was to all appearance on the brink of dissolution. Her

pulse was scarcely perceptible, and her skin was of a dark or purple colour. From these symptoms, I entertained no hopes of recovery, but ordered her a stimulant draught with æther and laudanum, &c. which seemed to revive her, and a second was given; when her natural colour was gradually restored, and the convulsions returned with the same violence as before. Her pulse now became strong and hard: and a considerable fullness appearing about the head, I took away a pint of blood from the arm, and applied four leeches to each temple: after which, her head was shaved, and a blister applied over the whole. Her bowels being in a costive state, a solution of soft soap was ordered as a glister, and an opening mixture with neutral salts and infus. sennæ. The bleeding having reduced her almost to a state of syncope, she sunk into a comatose sleep, in which she continued for six hours, when she awoke, and was for a few minutes quite sensible, but again became delirious, and uttered the most incoherent expressions. As her pulse did not warrant a second bleeding, and the convulsions having entirely subsided, she took draughts every three hours with mixtur. camph. aq. ammon. acet. et vin. antim. which produced a most copious and general perspiration; in which treatment she persisted for two days; during which time she gradually recovered her senses, and is now perfectly recovered."

ON THE PROGNOSIS IN LABOUR.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—A CORRESPONDENT, in one of your former numbers, endeavoured to controvert the opinion delivered by an ingenious Surgeon on the uncertainty of the issue of labour.

Two cases lately occurred to me, which confirmed strongly what that Surgeon asserted, and point out the propriety of a close attendance on the patient during the whole progress of delivery. I was called to a lady whose labour was only commencing, and after staying some time, and observing its pro-

gress, I deemed it unnecessary to continue longer my attendance at this time, returning home at four in the morning. About eight o'clock I was again sent for in a great hurry, and found the child born before I arrived. The account I then received of my patient was singular. From the time I left her, at four in the morning, she had not had the return of a single pain, nor would it have been known that she was delivered, but that the nurse perceived by chance something stir under the bed-cloaths, and, on raising them, she found it to be the child. The patient did not know of it; she felt no pain, and therefore could not suppose herself delivered.

The second case was that of a lady who had been but slightly complaining; so little, indeed, that I was not sent for. In this state she called for her *pot de chambre*, and when in this situation the child was precipitated into it.

These are circumstances that speak for themselves on the attention that is necessary to be paid by an accoucheur to his patient in labour. Practitioners are afraid of telling all they meet with in this way, from the danger of reflection upon themselves; but it is only by a communication of such accidents that the younger part of the profession can be put upon their guard.

I am, Gentlemen,

Your obedient servant,

Bath, Dec. 10, 1808. T. S.

OBSERVATIONS ON RUPTURE OF THE PARTURIENT UTERUS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—RUPTURE of the uterus in labour is an accident which, though not frequently occurring, every accoucheur should be aware of. Permit me, then, to state what regards this subject; for, rare as it is, there are few practitioners of extensive experience who have not met with it: to the lot of some it has fallen a great number of times.

The occurrence indeed of this accident we shall not be surprised at, when we consider the manner in which the action of the uterus takes place in labour. By its contraction, every part of its cavity is straitened, or forms a resistance to its contents. This resistance, however, is less at the orifice than in any other part, and the action of the other parts is likewise assisted by the abdominal muscles, and diaphragm, which render the effect of their contraction more powerful on the orifice.—If then the orifice is uncommonly rigid, or præternaturally contracted, so as to possess an equal resistance with the action of the other parts, the labour either cannot proceed, or some part of the uterus that is weaker than the orifice, from the action of the other parts bearing against it, will give way, and a rupture of it then be produced. The place of the uterus, at which that most commonly happens, is the neck,—for the fundus is protected from the superior resistance it acquires, by the addition of the abdominal muscles, and other assistant parts, co-operating with it.

The causes of this accident are all unknown to us, and we shall only repeat them as enumerated by authors.

1. The first set of causes is, those which produce difficult labour,—as distortion of the pelvis, and morbid contraction of the external parts.

But these we know occur in a thousand cases, without rupture of the uterus.

2. Violent and irregular contraction of the organ itself, as in case of convulsions; and if this symptom occur along with distortion, so as to prevent the termination of delivery, it certainly may have a very powerful effect.

3. The excessive bulk of the child's head locked in the pelvis; and,

4. Accidental injury of the uterus itself, from strokes, &c.

These causes then occurring where the uterus is previously in a diseased state, may occasion this accident to happen; but we can have very little suspicion of it till it take place; and even admitting we have suspicion of it, we are not autho-

rised, on such slight grounds, to attempt immediate delivery, without other circumstances in the case indicate the propriety of it. Hence it is of more consequence to be able to ascertain the signs of this accident, when it has really happened, than to know its causes.

The signs commonly enumerated, are—

1. The sudden disappearance of the head, or presenting part, formerly easily felt.

2. Excessive pain of the abdomen, fixed particularly in one place.

3. Remission of the throes of labour, formerly violent.

4. Reaching and flooding; and,

5. Weak intermitting pulse, with tendency to deliquium.

It is, however, the sudden disappearance of the presenting part, if once certainly felt, and the state of the pulse, we are more to trust to than any other; for the others may all occur in the course of a natural labour, independent of this accident.

In the late Dr. Young's Lectures of Edinburgh, there are three cases mentioned of this accident, and in all of them the labour pains were uncommonly trifling, so that it could not be referred to any violent action of the organ, but was evidently the effect of disease.

Where this accident occurs for the delivery of the child, the Cæsarian operation has been proposed; but some objections may be urged against it, from the state of the patient, and more especially as the child does not descend completely, for the most part, into the abdomen; so that some of its members being entangled in the laceration, will allow the introduction of your hand to get at the feet, when the delivery may be more properly completed in this way. Besides, wounds of the uterus are mentioned by authors as not always fatal, and a greater chance therefore is given to the patient, if the extraction is made in this way, than by a

new incision through the abdomen. The delivery, however, must be very quickly made, as, by keeping the wound extended, the patient will sink in a few minutes from the internal hæmorrhage, and she commonly indeed dies under your hands. Hence it has been proposed by some authors, to delay any attempts at delivery till the death of the mother takes place, and that the Cæsarian operation should then be performed as quickly as possible. But however humane this practice may be, it is not giving her any chance of recovery; and when the smallest hopes remain, however unfavourable circumstances may appear, it is certainly the duty of the practitioner to take advantage of them, and to leave nothing undone which may contribute to save the patient.

Where the rupture again occurs in the more advanced progress of labour, or where the head is fixed in the pelvis as soon as this accident takes place, the forceps are to be employed, to make the extraction as quickly as possible; and the hand being then introduced, to bring off the placenta, you will be able to ascertain the extent of the rupture. But the great loss is, that it is only by the death of the patient the accident is for the most part ascertained; for the diagnostics are so uncertain, as either not to strike practitioners at the time, or the patients being attended by women, they are not sensible of the danger when the accident occurs.

To this subject, Mr. Croatz has paid particular attention, and has endeavoured to mark those previous symptoms in the course of the labour that point out this accident as going to happen. He remarks, that in such women, the abdomen, upon examination, feels very prominent, and much distended, the vagina drawn upwards, and the orifice of the uterus uncommonly high. The pains at the same time are extremely violent, without any intermission, and the labour is very inconsiderably advanced by them. But

all these symptoms may occur in the course of labour, without any such accident taking place; and therefore the enumeration of such symptoms serves only to frighten a practitioner in his attendance, and more especially if his patient has been in a delicate ailing state.

These remarks may perhaps induce some of your correspondents to favour us with any history of cases of ruptured uterus which may have occurred to them. These cases will tend to confirm or disprove what is stated above.

I am, Gentlemen,

Your obedient Servant,

F. MELLIS.

Upper Thornhaugh Street,
Dec. 10, 1808.

The London Practice of Midwifery; to which are added Instructions for the Treatment of Lying-in Women, and the principal Diseases of Children, chiefly designed for the use of Students and early Practitioners. 2d Edit. 12mo. pp. 300.

THE title is a popular one: what comes from the metropolis carries a charm with it. The present volume, we are told, is a compilation from the lectures of Dr. Clarke. We are sorry to say, it will not add to the Doctor's reputation. What may pass in a lecture, should not come before the public in a volume. It is clearly a publication for a raw country-lad, who comes to attend for three months the London Lectures, and to return at the end of that time as a finished accoucheur, with a diploma stating his qualifications for diligence and attention, signed by his teacher, and framed and glazed, to be hung up for the inspection of his customers, and to raise their ideas of the magnitude of his

acquirements. From the book now before us, such a person will learn, that in case of spurious pregnancy, " we must not tell the patient the truth, but throw a shade over each symptom. We may say, No doubt but she is with child, but we have some doubt with regard to her reckoning on her confinement. We may ask, If she has been sick in the morning, all the time from that she first reckoned? She will say, " No, certainly; but do you doubt my being with child ?"—" O no, there is little doubt of that; but stomach complaints will at times arise in a very strange way. You have felt the motion of the child, I suppose ?"—" O yes, very often."—

" But have you ever felt a limb coming up, or a knee pressing, as if it would come through your side ?"—" Why no, not so plain as that, certainly; but I have felt it move so often, that there can be no doubt."—" Aye, but are you sure it might not be wind ?"—" Why, dear me, Sir, you never doubted it before ?"—" Oh, I do not doubt it now; but wind will do this, and feel a good deal like a child. Pray are you always sick in the morning? Because I once knew a young lady who was mistaken on this point, and she had seven children afterwards."

In case of spurious pains we are told that " when a practitioner is sent for without occasion, he should particularly avoid showing that he is out of humour; it can do no good, and is often productive of harm. A gentleman being sent for on one of these fruitless errands, began abusing the nurse most unmercifully; the consequence was, that the lady sent to another gentleman when really in labour. The great object is to remove the cause; to do which we should empty the bowels, and afterwards give an opiate draught."

The advice on the accoucheur's first going into the room is equally instructive:

" It is very difficult for a man at first to find his way, where it happens he was not known to the patient before; for the

sight of him will at times, indeed generally, cause a sort of sensation which frightens away the pain for a length of time. In the early part of labour this is of great consequence; a practitioner's time may be consumed, when it may be the woman only fancies herself in labour; how then is this to be discovered? There is no other mode than by doing away the first impression, which, as a stranger, he has made. With this view it is very easy to remark on her family, that Richard is the picture of his papa, and that little Miss Sally has the countenance of her mama, observing that the girls are the handsomest, and how natural it is to expect that they should be so; that it rained yesterday, but has a fairer prospect to-day; that the wind was yesterday in the north, but to-day to the east; that the weather is very odd for the time of year, but there is reason to expect it will soon change for the better. In the midst of this she will get a pain, which will bring the conversation very naturally round to pain; then we may inquire the number of pains, the length, violence, and interval of them, &c. till she gets a second, which it is right always to insist upon as being a very bad one, just for the sake of urging an examination, the necessity for which should be explained on account of giving her satisfaction, which is necessary. She will say perhaps, "But I have not had a show yet."—"Have you not, indeed!" may be the answer: "If that is true, it is very necessary I should examine if the child lies right." If she says she has had a show, we can still make it an argument in favour of examining. If the waters are broken, or not broken, if she is strong or weak, we may easily make some reason or other in favour of our examining, for we cannot know with accuracy how a woman is going on, till we have examined her, after which, we may make up our mind as to the probable duration of the labour; but in the early stages of labour we should never allow that they are in labour, but say, that we think they are going on

very far towards being in labour, and this more especially where we know it is a first labour. If we tell them they are in labour, the woman will then go on fatiguing herself and get no repose, while, by another mode of conduct, we obtain for her a good night's rest. We should never allow of their getting us to form a prognostic as to the duration of the labour; we may generally prevent them, by telling them that we have ascertained the child lies well, and it will be an easy labour, or some such thing; adding, that, as to the time it may last, we are not able to say exactly; or if we do hazard an opinion, it is never till we have the child's head in our hand, and even then we are very cautious, having been often deceived; we may then perhaps say, the child may be born in a pain and a half, or a pain and three quarters."

On early evacuation of the waters, as a cause of difficult labour, it is observed:

"A patient in this situation requires a little management; it is not just to stay with her all the time; and yet it is necessary, if we leave her, to leave her in confidence; therefore we may give her the idea of making provision for whatever may happen in our absence: we may pass our finger up the *vagina*, and make a moderate degree of pressure for a few seconds on any part of it, so that she may just feel it; after which we may say to her, "There, Ma'am, I have done something that will be of great use to you in your labour." This she trusts to; and if, when she sends for us, we get there in time, it is all well; if later than we should be, we easily satisfy her: "Yes, you know I told you I did something which would be of great service to you in labour." If the *placenta* is not yet come away: "Ah, I am quite in time for the after-birth, and that you know is of the greatest consequence in labour." And if the whole is come away, "We are glad the after-birth is all come away, in consequence of what we did before we last left the patient, and the labour terminated just as we intended it should."

The management of twins is thus detailed:

"As it is necessary to wait before delivery the second time, we must be prepared for it, and amuse the patient with conversation: she may inquire, "Dear me, Sir, why does the after-birth stay so long this time?"—"Oh, they will sometimes be very tedious." She will say, "But the last time I lay in, it came away in ten minutes."—"Did it, Ma'am? aye, I have attended so many since I attended you last, that I don't recollect exactly the time it took in coming, though I recollect all the material circumstances clearly." We should, therefore, let her have an hour to cool and to nourish; and if, when she begins to feel herself strong, she should be again uneasy about the after-birth, we may alarm her a little, so that, after playing this piece of artifice, she will be quiet enough. Thus we may begin by explaining to her that the after-birth is like a sort of sponge, which ought to contract, and will not, in some cases, till after a considerable time; when it does so, it will get free; but if she is very anxious, that we will get every thing ready to go up and perform the operation of separating this spongy mass; that we will not give her any more pain than we can help, though it is a very painful operation without a doubt. Before we have said so much as this, she will feel herself less inclined to it, than she was, and tell us that she feels herself easier, and, if we please, she will wait a little. We may then urge it, for we may be sure she will be against it. The time, however, comes when we really see it necessary to turn and deliver, or at least to deliver. We have now to undo what we have been doing. This we do by representing that the sponge is separated and is kept by the *uterus*, which it is easy to set right without much pain. Thus we must amuse the patient by talking of the after-birth till the second child is delivered. When the last child is delivered, we may pull gently at the cords of all the after-births at once, in order to prevent a partial separation, which might bring on flooding;

pulling at one cord separates one *placenta*; this brings on bleeding, and the woman dies; therefore they must all be considered as one, and treated, in giving assistance, as a single *placenta*.

"It is necessary for a young man to be prepared for a question that may be asked: one of the women may perhaps say, "Pray, Sir, did you ever see a case of twins?" If he was off his guard, he would be apt to speak the truth, and say, no, he never did; now if he says no, he does an injury to the woman and himself too. She will reason thus: "Oh dear me, I hope I have not got twins, for he won't be able to deliver me, as he owns he never saw a case in his life." Her pains will gradually go off from the alarm. The way is to give an equivocal answer, as, "It would be very odd if I had not seen a case of twins in so large a town as London, in the midst of which there are so many advantages, such a number of large hospitals, that I declare a person has an opportunity of seeing much more in London than he would have any where else."

From the above extracts it will appear that what the book wants in science is made up in policy. It is the system of Machiavellian deception to be practised on the poor woman solely for their *own good*, and to enhance the character of the profession. So that if the young man who peruses it is not made an *accoucheur* by its lessons, he will at least be made a *cunning fellow*.

If this work is compiled from Dr. C.'s Lectures, which we doubt, he may be considered the Machiavel of Midwifery, fit to preside over every gossipping chamber of the metropolis; and, in the language of French official costume, he may be styled Intendant General of the Department of the Sex.

IV. PHARMACY, &c.

The great improvement of modern pharmacy is the simplification of the art of prescription. This simplification has, perhaps, been carried too far, and the activity of operation is often lost by studying clearness of induction. This may be instanced in many preparations: the elixir paregoricum, or camphorated tincture of opium, as originally made, is a more successful preparation than the modern improvement of it. This subject has been very ably descanted on by the late Dr. George Fordyce in the case of several purgative compositions, shewing that the combined action of certain medicines is very different from their powers in their simple state, as in rhubarb, senna, aloes, &c.; and that it is only from facts and experience, not from reasoning *à priori*, on the particular properties of separate articles, that can enable us to judge of the real qualities and powers of such compositions. In the use of metallic remedies, such combination is of less consequence, from the natural activity of their operation. The only point is to exhibit them in their most active chemical state; and since "Philosophers," as Mr. Dunn observes, "have asserted, and on the testimony of experiment, that the action or activity of metals depends on the proportion of oxygen with which they are united, to this principle we may attribute the more immediate influence of the muriat of mercury to the submuriat."

ARSENIC ACID.

This acid is introduced into practice by Mr. Dunn, of Wells in Norfolk:

"Having," he remarks, "about six weeks back, had cases of obstinate intermittents, which resisted the usual means employed, as the bark, cancella albe, Fowler's mineral solution, emetics, &c. I resolved upon the trial of the arsenic acid. The acid was made, according to Bu-

cholz's process, by first mixing in a retort, one part of muriatic acid, four parts of the white oxide of arsenic or arsenicus, and twelve parts of nitric acid; then boiling the mixture till nitrous gas ceases to be engaged. After the mass was evaporated to dryness, by exposing it for a few minutes to a lowered heat, I dissolved it, being about 32grs. in 8oz. of boiling water. Of this solution I gave three drops every two hours, combined with either an equal quantity of tincture of opium, or cascarilla bark. The result was particularly successful. The following are facts which at once prove the fallacy of its being injurious, (at least when given in small doses,) and at the same time its decided and remarkable efficacy.

"Robert Curle, a boy about 14 or 15 years of age, who had lately enjoyed exceeding good health, was attacked in the commencement of September with general rigour, great prostration of strength, and a vomiting of green bilous matter; these symptoms were gradually superseded by the hot stage of fever; the pyrexia was considerable, tongue parched, and skin excessively hot and dry; he took during this stage, a draught with nitre, which was immediately rejected. He then attempted to swallow a beverage he called for, made with apple-juice and water, but the irritability of his stomach continued so great as to refuse every thing taken. During the remission of the paroxysm, he took an emetic, which operated perfectly well; and after his stomach was easier he began with three drops of Fowler's solution, which were repeated every two hours. The second day following, he was attacked as usual, and the hot fit, if any thing, was more violent. His medicine was continued with the addition of one, and afterwards two drops at a dose. Notwithstanding, the paroxysms came on every other day equally severe for nearly a fortnight, when they remitted for about three days. A relapse ensued; the type, however, was more regular. He then began with three drops of the arsenic acid,

which was afterwards increased to four. This dose was taken every two hours. The next day he was again attacked, but with much less severity. Since this time, the fever returned no more, and he is now as hearty and free from disease as ever.

" Encouraged by this success, I next gave it a trial in a case of Rheumatism. The subject's name was Ely, of the parish of Wighton. On her first application, she complained of considerable pain and rigidity of her arm. The tendons at the elbow-joint were very much enlarged, and the muscles of her arm were so contracted, that she could scarcely move it. A strong volatile liniment was ordered, frequent friction with flannel, and the topical application of the warm bath.

" On the 7th of September, which was about three days after, she was much worse; her arm the same; much pain and inflammation about the ancles; pulse quick; tongue white, and indeed she had now every symptom of acute rheumatism. Leeches were applied to her ancles; the inflamed parts were ordered to be kept constantly wet with a lotion composed of spt. terebinth et aqua. The sudorific regimen was enjoined.

" R. P. ipecac. comp. six grains—Pulv. quaq. quart. hor. sumend.—P. ipecac. c. eight grains—Calomel three quarters of a grain—G. a. q. s. ft. bol. h. s. sumend.

" As her bowels had been rather relaxed, no aperient was deemed requisite. In a few days the inflammatory symptoms abated, but the pain and tension still continued, and every joint was alternately affected.

" R. Solut. Fowler miner.—Tinct. opii. aa. two ounces, sumat. gtt. viij. secund. hor.

" September 10. Continues much the same as to pain and rigidity of the joints. Rep. gutta also.

" R. P. cort. fl. half an ounce—P. canell. alb. gr. v.—M. Pulv. sumat. ter in die.

" 17th. Little amendment, very weak, still much irritability and contraction of the muscles.

" R. Solut. arsenic acid gtt. iij. quoq. bihor.

" 19th. Better. Rep. gutta.

" 21st. The arm is reduced to its natural size; her ancles, though painful, are considerably better.

" 24th. Feels so much recovered, that she complains now only of weakness, which, perhaps, was aggravated by her taking, from some serious mistake, a quantity of white vitriol to the amount of a scruple.

" R. Vin. ferri six ounces—Sumat. cochl. parv. j. ter in die.

" The last words which I heard from her were, that she is very finely.

" On the 16th of September, George Parker, residing in Wells, complained, " his poor boy, who had got the illness that is about, wanted some medicine, as he had been sadly with it off and on," as he expressed himself, " for some time."

" R. Antim. tart. gr. j. P. ipecac. gr. v. M. pulv. Stat. sum. Solut. arsenic acid. Tinct. opii. aa. 1 ounce, M. sumat. gtt. v. quaq. secund. hor.

" The next day he was again attacked, but with a very transient paroxysm. Though transient, it was his last, and he is now quite well.

" A few days after, Geo. P. himself came, and with the same complaint as his son's was. The type of his intermittent was a regular quotidian. His head suffered excruciating pains, and when I saw him, his skin was almost scorched with heat; pulse quick; frequent nausea; dry tongue; and bowels very irregular. I gave him an emetic with a scruple of ipecacuanha, and afterwards ordered eight drops of the compound solution, of equal parts of arsenic acid and tinct. of opium, to be taken every two hours. The day he applied was the 26th of September.

"On the 29th, I found he had entirely lost his fever. Being rather of a phthisical habit, and at that time labouring under a troublesome cough, the following pills were prescribed.

"R. Fer. vit. two scruples—Pil. scillæ two ounces—P. opii three grains, M. et divid. in pilula XL—Capiet iij. ter in die.

"His health is now perfectly re-established.

"On the 18th of October, a man by the name of Lake, of the parish of Holkham, who had been labouring under a tertian intermittent for a considerable time, applied for medical assistance. He had been previously attended by a Mr. R. and taken about thirty-two bark powders, but without deriving the least benefit. On the first day of his application, he began with the arsenic solution without any emetic, *ut* infra præscripta.

"R. Solut. arsenic acid—Tinct. cascarillæ æ three ounces —M. sumat gtt. vj. quaq. dua hor.

"On the 22d, the drops were repeated, but he informed me the fever had attacked him only once since he took the medicine. I saw him again on the 26th, and with ineffable joy in his countenance, he told me that he has suffered nothing from his complaint since the time above-mentioned. My appetite, says he, is improved, and my strength so much recruited, that I feel quite another man. To these might be added no less than twenty other instances where I have given it without the least injury, but with the most decided advantage. One patient, however, took it to the extent of nine drops, which brought on a great degree of vertigo; but another, (like the first) imagining the larger the dose the sooner the cure, took at least sixteen drops at once, and without any bad consequence. To avoid these errors in future, the drops were given in a mixture; and though the latter, a Mrs. Norman, had taken that extraordinary dose without

any sensible effect, I found in three days after, the diminished dose of four drops every two hours effected a cure.—Such are the results of an acid, which, I believe, has never till now been ventured internally; if I am wrong in this conclusion, I hope to be forgiven. To calculate on the superior advantages of this solution is useless; what has been said of the white oxide may be said of this acid, only that the latter is a more active preparation. The value of a medicine is generally in proportion to the simplicity of its form. Though the bark may cure, when taken in sufficient quantity, any intermittent; yet, the disgust which it creates, the nausea which it excites, and the neglect of it which consequently ensues: two-thirds of the sick, rather than take it, will leave themselves a prey to their disorder, trusting to the chances of fortune, or the auspices of their Creator."

OPIUM.

DURING the late high price and scarcity of this valuable article, the East India opium has been much used; it has not, however, been found so efficacious as the Turkey, except when used in nearly double the quantity. Opium, though not in any considerable quantity, has also, during the late scarcity, been imported from Madeira, the produce of one of that cluster of islands of Porto Santo. It is said to be more aromatic, and more free from impurities, than either the East India or the Turkey opium: it is said also to be the natural juice of a species of poppy growing there, and yielded by excission. It is, in point of efficacy, found equal to the Turkey, and superior to the East India. The price of Turkey opium is, however, from the very large importation lately made, now reduced from six guineas per pound to thirty or thirty-four shillings; but it cannot remain long at this reduced price, as it is known to sell for more at this present time in Turkey.

COMMUNICATION ON FISH-POISON, BY MR. KIERNAN, MEMBER OF THE ROYAL COLLEGE OF SURGEONS, LONDON.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—SOME observations were introduced into a former number of your valuable work, on the subject of Fish-poison. This deleterious quality, it was observed, was confined to the fish of the tropical climates; and though the fact is in general well-founded, yet an exception to it in this country has come within the sphere of my own knowledge in the following case.

Mr. Belton, of George Street, Cavendish Square, dined on a very fine *Barbel*, as also his wife and child. In the course of three hours after eating it, they were *all* seized with excessive *vomiting* and *purging*, and these symptoms continued the whole night, till the morning when I saw them. On making the most minute inquiry into the source of their malady, I could find no other cause to which it could be attributed, than to the eating of the fish. I therefore conceive this circumstance may arise in any climate to give the deleterious quality stated in your work to this species of food. This quality has been particularly noticed as attending the use of Mussels, and therefore caution is observed by most people in eating them; but the same circumspection has not been thought necessary with *White Fish* of any kind, nor should I have conceived it till I met with the above case. When I was called to the patients, I found, from their history of the symptoms, that no farther evacuation was necessary, and I immediately had recourse to quieting medicines, which were attended with the desired effect, and the symptoms were soon removed. In the child they were,

however, more obstinate than in the father and mother: she continued long ill. That the nature of this fish may be known, I shall extract the following account of it from a popular writer on diet.

"The Barbel is a sea-fish that rarely weighs above two pounds. The smallest kind are esteemed the best. It is somewhat hard, and difficult of digestion; but it is considered as a nourishing, durable food. It was particularly valued by the ancient Romans, with whom it formed one of the dainties of their table, and was bought accordingly by them at an excessive price. The parts of the fish esteemed most delicate are the liver and the head."

If these observations deserve mention in your publication, so as to put people on their guard, they are much at your service.

I am, Gentlemen,
Your obedient Servant,
F. KIERNAN.

Charlotte-street, Bedford-square,
Dec. 15, 1808.

COMMUNICATION ON ELECTRICITY, IN CASES OF SUPPRESSION OF URINE, BY F. LOWNDES, MEDICAL ELECTRICIAN.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—In one of your former numbers a very interesting case was related by Mr. Calderwood, to shew the superior powers of Electricity to those of Medicine in the cure of obstinate suppression of urine. The truth of Mr. Calderwood's assertion I am satisfied of, and can support by the strongest testimonies of the powers of this remedy in the

same disease. But I must remark that the tediousness in the cure rather surprised me, compared with the case by Electricity with which I have found it take place under my own care. This I attribute entirely to the imperfection of the instrument, which was incapable of giving that energy and excitement to the organ by its stimulant operation, which a larger one would have at once effected. It is from this circumstance, that, with the common machines which surgeons generally use, Electricity, though such an active medical agent, often fails, and the truth of this I can vouch by cases coming to me after they had been in the hands of others without success, and then experiencing a ready and permanent cure of their complaints. Hence it is entirely the size of the instrument that makes the certainty of a cure to be depended on.

Of late a comparison has been made by some authors, between the powers of Electricity and Galvanism. As yet our experience of the effects of Galvanism is small. It has received much praise in cases of paralysis from Dr. Bardsley, of Manchester; but it seems a power that requires some caution and nicety in its use more so than electricity; and though I do not wish to call in question its influence, where sense, motion and intelligence are impaired without any organic fault; yet I think, Electricity is a power of more extensive application, which can be better modified in morbid circumstances, and which, on the whole, promises a more certain mode of cure. Perhaps, in certain affections, it might be of use to alternate these two modes of treatment, or to *Galvanise* the patient first, and on the succeeding day have recourse to the influence of Electricity. This experiment is certainly worthy a trial in those dangerous and hopeless diseases, to which the nervous system is subject, and which so much impairs both the mental and bodily vigour of so many unhappy individuals at the present period. Never was a time at which nervous diseases were so prevalent, so variously modified, and so obstinate and refractory to the influence of medicine.

As the present communication was entirely suggested by the slowness of cure in the case of suppression of urine, detailed by Mr. Calderwood, in order to prove the justice of my remark, I shall, in the next number, offer the particulars of some instances of obstinate suppression of urine, which had resisted all the usual remedies, yielding to the application of Electricity at once, and in so complete a manner, that the water was discharged in a full and powerful stream before the patient had finished his first attendance on me.

I am,

Gentlemen,

Your obedient Servant,

F. LOWNDES.

St. Paul's Church-yard,
Dec. 20 1808.

LETTER ON THE OXID OF BISMUTH.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—No disease is more obstinate than the common one, known by the name of stomach complaints, and we are in want of a remedy which may be termed specific against this train of disorders. In fact, irregularities in diet are too often the great source of this affection, and a life of temperance, sobriety, and water-drinking, which is the great step towards a cure, can hardly be submitted to by most patients. Of late, a remedy against these disorders has been prepared by Dr. Marcet, *viz.* the Oxid of Bismuth; and I give him credit for its introduction. I have repeatedly tried this remedy in affections of the stomach, attended with indigestion, pain, and spasm, and found it answer every intention which has been described. In some cases the relief was very rapid; in others the cure went on

more gradually; but from my own experience, I can vouch it to be a medicine of very active powers. It is highly necessary, however, that this Oxid be in a pure state, and well prepared. In confirmation of this opinion, I have also the authority of Dr. Bardsley, as well as Dr. Marcet, in its favour. It is said to have alleviated even the excruciating pains of a cancerous *Pylorus* by Dr. Odier. The particular affection in which it seems to excite its powers, as it were specifically, is in the *Pyrosis*, or *Water Brash*. It should be assisted in its operation by a proper use of aperients, and it is perhaps one of the safest metallic preparations that can be introduced into the system. These circumstances I state with the view to attract the attention of the profession, whose experience will confirm my assertions or detect my error, if I have carried my zeal for novelty and improvement too far.

I am, Gentlemen,

Your obedient Servant,

A CHEMICAL PHYSICIAN.

Liverpool, Dec. 10, 1808.

ON TAXED MEDICINES.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—I SUBMIT to you the propriety of inserting in your useful publication, a thought which struck me a few days ago, on buying a few bottles of Soda Water, which I was advised to take to restore my health:—When a tax is laid on a medicine, *quack* or *not quack*, for no difference it seems has been made, it is not on the vender it falls, but the buyer: he unfortunately must buy, or die and be d——d, if he cannot do so: while the vender, who frequently makes no

less than two hundred per cent. by the sale, cannot, to be sure, afford to sink the tax out of his profits. Hence it becomes a tax actually laid on by Quacks and Medicine Venders; who, if reports speak truly of them, make a rare living by the misfortunes and credulity of mankind.

I am ill—Soda water, I am told, will cure me, if taken in sufficient succession. Yet I am poor, but as I am anxious to be cured, I muster enough money to buy a sufficient quantity to last me for a week's trial. I find it does mend me apace; but as I must drink two small bottles per day, which are 7½d. per bottle, *duty included*, that is 9s. 3d. per week, my means will not allow me to continue this expense. I am therefore compelled to give up to chance the prospect of my speedy recovery. Yet, Sir, I am assured by medical men, that this 9s. 3d. worth of Soda water does not cost, all expenses included, 3s. *bottles and all!* This is a great shame; and, as it concerns the health and welfare of thousands, who, I have no doubt, either now do, or have suffered from the same cause, I think it would not be amiss if some of our great folks would lay their heads together for a few moments to endeavour to obviate this evil—not only in the instance of Soda water, but many other valuable medicines.

I may be wrong; but I do not see why the price of medicines, I mean such as are essential and valuable for the cure of certain diseases to which mankind are liable, should not be fixed by proper persons appointed for the purpose, in the same manner that certain necessary articles of consumption are,—such as bread, sugar, &c. Are not useful medicines as essential to the welfare of mankind as the former? Then, if Ministers thought proper to lay a tax on these, they might always be able to do so, with justice to all parties, by laying it on such medicines as circumstances rendered best able to bear the impost, such as a fall in the price of the in-

gredients with which they are manufactured. The public, by these means, so far from suffering by such a tax, would be benefitted in proportion to the sum produced by it. Instead of which, as the taxes are now laid on these articles, they are very often grievously felt, by the poor sick man, who is not only in want of the medicine but often money to buy it.

I might enter more fully on the benefit likely to arise from the adoption of my plan, and its practicability, but I fear to intrude too much on your room.

I remain, Gentlemen,
Your obedient Servant,
A SICK MAN,
And formerly a Patient at Guy's.

London,
Dec. 20.

THE complaint of the above correspondent is just: he speaks a language which every man who has felt sickness will approve. The preparation of mineral waters is certainly rendered now both a simple and cheap process. Their powers as medicines are held in high estimation by the Faculty at large, but the fact stated by our correspondent is true, they are only to be got at a *high price*, which the pocket of the poor man cannot command. He is thus excluded from their benefit—for they are not remedies prepared in the public hospitals, nor have they yet, however necessary they may be, entered the list of the College Pharmacopœia. In a former communication by a correspondent to this work, the subject was treated in a letter to Dr. Babington, advising an attention on the part of the College to this, and we hope these hints have not been thrown away. We conceive that the mineral waters being prepared at all the public hospitals and dispensaries, both a cheaper and more successful plan of medicine might be adopted, and the complaint of our poor sick correspondent done away.

MEDICAL INTELLIGENCE.

TO THE ARMY MEDICAL BOARD.

AN ingenious Correspondent has desired us to offer the following suggestion to the consideration of the Army Medical Board. In the present arduous service in which our brave troops are engaged in Spain and Portugal, it must occur that the soldiers dress of this climate must be a great impediment to their exertions. The chief inconvenience suffered by men in these countries is from the rainy season setting in, by which they are kept constantly drenched with wet. The moisture soon soaks through their heavy great coats, and other parts of their dress intended to guard them against it, so that these parts of their dress thus add to their inconvenience by their weight as well as moisture, instead of being a protection or comfort. For the service on the Continent it would be fitter, as heat is not so much wanted as dryness, that a light wax covering, perfectly waterproof, could be made, which, on the approach of rain, could be thrown over the rest of their dress, and completely defend them from the inclemency of the weather. It could be easily carried in their knapsack, and might be so formed as to make no more than two pounds of additional weight. When we consider that moisture is the great predisposing cause to all Army diseases, the above observations merit the serious attention of the Medical Board, and all the Military Departments.

THE ESSEX REPORT OF VACCINATION.

If we take our own experience as the test of Vaccination, we are its decided friends, and shall always feel happy in the removal of doubts on this very interesting point: we are of opinion the following candid statement will materially contribute to its success, and under a firm conviction that every friend to humanity ought to facilitate this national object, we have given it at length, as it affords irrefragable evidence of the security of vaccination, attested by the first medical characters in the County of Essex:

At the Anniversary Meeting of the Colchester Medical Society, holden this day, August 23, 1808, the following Resolutions were entered on their Journals, in consequence of a motion made at their last Meeting, June 21st,

by Dr. NEWELL, requesting the Members of the Society, at their next Meeting, to Report their Observations on the Security of Vaccination as a Protection from Small Pox, and the consequent Effects of it upon the Constitution.

" Resolved, That the Members of this Society, from a steady, candid and impartial attention to the effects of Vaccination, during a period of eight years, in which time several thousand persons have been vaccinated by them, think it their duty to give this public testimony of its perfect safety and security as a preventive of Small-Pox; and further, that under the fullest conviction of the practice, they have not only recommended it to their patients, but introduced and practised it in their own families, amongst their nearest and dearest relatives. That they have at different times exposed many of their patients, long afterwards, to the contagion of the Small-Pox in every way they could devise, with perfect safety from its infection, and that they have never been able to trace any subsequent diseases, as excited by Vaccination in the constitution.

" They feel it the more incumbent upon them, at this time, to make so public an avowal of their sentiments, as the Small-Pox has lately been so extremely prevalent, and fatal in this town and its vicinity, and because the prejudices against vaccination, particularly among the lower order of the people, have been kept up by false and infamous reports, some of which have been artfully introduced into publications of notoriety and extensive circulation.

" They are fully convinced, that it is only by the unbiassed declarations of experienced and respectable practitioners in different districts, the public mind can be satisfied, and this most valuable discovery and practice universally adopted.

" Resolved, That this Society views with abhorrence the subtle, artful, and designing conduct of some practitioners, who continue indiscriminately to recommend Inoculation for the Small-pox or Cow-pox, as best suits their purposes, and by that means frequently, when the former is adopted, diffuse and spread that most dreadful and destructive pestilence through whole villages or populous districts, regardless what misery and distress they entail upon others; of such shocking conduct the Members of this Society have lately had the many proofs, and they earnestly hope that proper and effi-

cient steps will ere long be taken by the Legislature to stop this horrid traffic.

"Resolved, That Copies of these Resolutions be transmitted to the different Medical Journals now in circulation, and a sufficient number of them printed and circulated in this town and its vicinity.

S. R. Mewell, Colchester.
Ph. Gretton, ditto.
John Godfrey, Coggeshall.
T. C. Harrold, Nayland.
Henry Nunn, Manningtree.
Wm. Travis, East Bergholt.
G. Rogers, Manningtree.
Wm. Silke, ditto.
Benj. Smith, Wivenhoe.
Nath. Salter, Boxford.
Maurice Mason, St. Osyth.
R. Nunn, Colchester.
F. Eagle, Coggeshall.
G. Kemball, Tolleshunt Darcey.
T. Osmund, Thorp.

The Medical Board, we are informed, was to expire on the 24th of this month. We have not heard what new arrangements have taken place, and what medical regulations are of course to follow. When these are made public, we shall be attentive to lay them before our readers. We hope they will make a material improvement on the old system, and that we shall have only to present them with commendation and satisfaction, as applying to all the wants of the service.

A proposal for the improvement of Dispensaries is just now circulating by Dr. Herdman, Physician to the City Dispensary, which we shall notice in our next number. It is addressed in the form of a letter to the Bishop of Durham, and the other Governors for bettering the condition of the Poor. We are afraid, however well-meant the proposal is, it is more speculative than practicable in these times.

We understand the Secretary of State for the Home Department has directed the Royal College of Physicians to inquire into the cause of the recent frequent occurrence of cases of Hydrophobia, and to consider of the means of preventing the increase of this alarming disorder. We look forward to this report with considerable anxiety, and have no doubt this learned body will give every attention to this interesting subject: it could not

have been committed to better hands, and we have no doubt considerable elucidation will be the result of their labour; the well drawn case of Dr. Powell, and the recent effects that case had upon the infant of Ann Chandler, we should conceive would lead to much important information on a subject in which the interests of mankind in general are at issue. That case in our opinion cannot be too widely diffused, and may justly be considered as the land-mark to future practitioners: we lament that men eminent for science and liberality, should in this instance deviate so widely from the point: we trust the intended report will finally settle the controversy, to the advantage of the civilized world.

A meeting of the College of Physicians has since been held on the subject; and we hope, from their united consultation, that some means may be devised to ameliorate the treatment in this most dreadful of all maladies.

St. Andrew's day Royal Society.—Dr. William Henry this year, releived the gold medal for his varions communications. (Sir Godfrey Crossey's.) Dr. W. H. Wollaston was the same day elected one of the Secretaries, and a Member of the Old Council: Dr. C. Ash was also elected of the New Council.

The Election of a Physician of the Surrey Dispensary, in the room of the late Dr. Hawes, has been attended with much opposition, and has excited general interest. It is not the business of this work to enter into the controversy to which this opposition has given rise. In the appointments to all public charities, our opinion is "*detur digniori.* If the merits of the two candidates are weighed by their profesaional experience, respectability, and uniform attention to the interests of the charity, the Governors can have no hesitation in their choice; but the interests of the charity are not always the bias on these occasions.

Dr. Tatersall, we just learn, has been *voted* in Physician to the Surrey Dispensary by a majority of *new* names about to be *scrutinised.*

Anthony Carlisle Esq. of Soho Square, Surgeon, F. R. S. is chosen professor of Anatomy to the Royal Academy.

We are sorry to learn the Small Pox rages with great violence at Wellington,

Retley, &c. in Staffordshire. In each county, the erection of a central vaccine station would be of great service: it is with pleasure we announce such a scheme is in agitation.

A letter from Savannah, dated Oct. 6, says—"Accounts from St. Mary's by the last mails, represent that place as very unhealthy. Letters from thence state the prevalence of a disease attended with every symptom of yellow fever.—Though the faculty did not consider it contagious, most of the inhabitants, we understand, had deserted the town, and fled into the country. The following is extracted from a letter received by last mail, dated on Friday:

"The fever has raged here more violently than I ever knew it in Georgia. Although it was at firt conceived to be very partial, it has extended to at least one third of the inhabitants. There are now said to be forty-eight cases, of which nineteen are black; and fourteen exclusive of this number have been interred. The town is nearly deserted.

A General Bill of all the Christenings and Burials within the Bills of Mortality, from December 15, 1807, to December 13, 1808.—

Christened in the 97 parishes within the Walls 1088.—Buried 1372.

Christened in the 17 Parishes without the walls 4503.—Buried 3969.

Christened in the 23 Out-Parishes in Middlesex and Surrey 10,105.—Buried 9737.

Christened in the 10 Parishes in the City and Liberties of Westminster 4210.—Buried 4876.

Christened	Males .... 10,189 Females ... 9,717	in all 19,906.	
Buried	Males ... 10,228 Females .. 9,726	in all 19,954	

Whereof have died—

Under two years of age	6,075	Fifty and Sixty	1,690
Between two and five	2,466	Sixty and Seventy	1,499
Five and ten	847	Seventy and eighty	1,200
Ten and Twenty	643	Eighty and ninety	505
Twenty and thirty	1,792	Ninety and a hundred	64
Thirty and forty	1,230	A hundred	1
Forty and fifty	1,971	A hundred and two	1

Increased in the burials this year 1,630

Never did the great cause of humanity suffer more severely by the death of any, than by that of Dr. William Hawes; a man venerated by humanity and revered by science; the wild Arab, the unpolished Indian, and the civilized citizen, each, in their turn, may owe to him a second life; the achievements of the warrior and statesman will perish in revolving time, but the name of Hawes will triumph over death, and the unclouded energy of his beneficence animate posterity. Were we to fondly indulge in enthusiastic sorrow, it would be incompatible with the solemnity of the occasion, and be completely opposite to that fascinating simplicity that sheds so bright a lustre on every act of his well spent life: the removal of such a character from the theatre of his beneficence, we must deplore as a national calamity, and in the plenitude of our sorrow, we naturally wish his residence had for ever been prolonged among us. In the erection of the Humane Society, the people of this country have received a legacy from which ages to come may derive happiness; the improvement of this legacy has been deposited to the care of the British Nation. Generous guardians, continue to improve this dowry, and let the vivid effusion of sensibility meliorate humane misery.

LONDON HOSPITAL.

Dr. Buxton's Lectures on the Theory and Practice of Medicine, and on Materia Medica will be commenced about the 20th of January. For particulars apply to Mr. Price, Apothecary at the Hospital, or to Dr. Buxton Fenchurch Street.

MEDICAL AND CHEMICAL LECTURES.

Dr. Clutterbuck will begin his Spring Course of Lectures on the Theory and Practice of Physic, Materia Medica, and Pharmaceutic Chemistry, early in January, at nine in the morning. Particulars may be known on application at No. 1, Crescent, New Bridge-Street.

Dr. Reid will commence his Course of Lectures on the Theory and Practice of Medicine, at his house, No. 6, Grenville Street, Brunswick Square, on Monday, January 23d, at nine o'clock in the morning.

Mr. Taunton will commence his Spring Course of Lectures on Anatomy, Physiology, Pathology and Surgery, at his Theatre of Anatomy, on Saturday, January the 21st, at eight o'clock in the evening.

Dr. Squire will, on Monday, January 2d, 1809, begin a Course of Lectures on the Theory and Practice of Midwifery, and the Diseases of Women and Children.

NEW MEDICAL PUBLICATIONS.

An inquiry into the symptoms and treatment of Carditis, or the inflammation of the Heart; illustrated by cases and dissections. By John Ford Davis, M. D. 12mo. 6s. boards.

Suggestions for the prevention of that insidious and destructive foe to the British Troops in the West Indies, commonly termed the Yellow Fever, &c. By Stewart Henderson, M. D. 8vo. 5s.

Observations on madness and melancholy; including practical remarks on those diseases; together with cases: and an account of the morbid appearances on dissection. By John Haslam, Member of the Royal College of Surgeons, 8vo. 9s. boards.

Practical observations on the nature and cure of strictures in the urethra, 8vo. 3s.

Identities ascertained, or an illustration of Mr. Ware's opinion respecting the sameness of infection in Venereal Gonorrhea, and the Ophthalmia of Egypt, 8vo. 2s. 6d.

IN THE PRESS.

In the press, and will be published next January, a second edition of Mr. Carmichael's essay on the effects of Carbonate, and other preparations of Iron upon Cancer, with an inquiry into the nature of that disease. This edition is much enlarged and improved, that it may almost be considered a new work. Among the additions, are a great number of highly interesting cases: a disquisition on the uses of Oxide of Iron on the blood, and remarks on such diseases as depend on its excess or deficiency, or in any way bear a relation to Cancer, with an attempt to answer the queries of the Medical Society established in London, for investigating the nature and cure of that complaint; we anticipate much information from this valuable collection.

Mr. Charles Sylvester of Derby, (late of Sheffield,) has in the press an Elementary Treatise on Chemistry; the plan is in many respects original.

We have received the prospectus, addressed to us, of an intended periodical publication, to be called THE DETECTOR; *but as it is irrelevant to the plan of The Medical and Surgical Spectator to enter into the merits or demerits of controversial disputes, we shall be silent on the nature of its intended contents.*

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THE LONDON
Medical and Surgical SPECTATOR.

EMPIRICISM.

THE Royal Patent was originally a reward to merit and a security to ingenuity, to protect the subject in the emolument he had a right to claim from beneficial discoveries. The acquisition of it was a title to the philosopher and artist, equal to the marks of honour conferred by universities on professional characters. On this original foundation it was worthy of praise; and in confiding it to the hands of the Sovereign, as the fountain of honour, the legislature shewed the expectations they had of this deposit, lodged in his hands, being applied to the original intention. But this plan of original brightness has lost its pristine lustre. Its security is prostituted to the tricks of imposition, rather than to confirm important discoveries. The establishment of the office requires to be supported, nor is it nice in its regulations: those to whom the department of investigation is assigned, are destitute of that general knowledge which should make them judges of the discoveries, real or pretended, that are submitted to their decision. Every patent, before being granted, should have the claims on which it is founded, investigated by those who are acquainted with the subject: and on their decision, its right to the title granted or otherwise.—Of the patents granted for medicines, we may safely aver,

that none of them are ever submitted to the opinion of professional characters. If they were, they would find all the compositions of those ignorant pretenders erroneous in the principles of their prescription, or else no other than common forms of the Pharmacopœia, intended for a special purpose, converted by imposition to the exalted state of an universal remedy.

The degraded rank of patent privileges, as a passport to public confidence and reputation on the head of medicine, cannot be better instanced than by the opinion entertained of them on the continent. When the Yellow Fever remedy was introduced into Spain, the Prince of Peace expelled it by Royal Edict, as dangerous to the lives of the community; so that one sovereign reprobated what another had given royal authority to use. In Russia, British Patent Medicines are not even allowed to be imported.

Of empirical medicines, those have been experienced the most successful to their owners which have been employed against incurable diseases. This we cannot instance more strongly than by noticing some of the specifics for Pulmonary Consumption.

ANTIPHTHISICAL SPECIFICS.

The first we shall introduce is the famous remedy of Mr. Godbold, termed his Vegetable Balsam.

GODBOLD'S VEGETABLE BALSAM.

This medicine is no more than the simple oxymel of the shops, consequently a composition of vinegar and honey. Such a simple remedy, therefore, as its inventor well observes, "if it does no good, can certainly do no harm." In slight colds or catarrhs, trifling remedies of this kind may be used; they at least amuse the patient; but where they are employed in diseases of a formidable nature, and under the impression that they are more than useful, nay infallible, to the prejudice of proper means being resorted to, the use of such remedies

becomes then criminal, and cannot be too much reprobated. Godbold's is certainly a remedy of this kind, introduced by ignorance, carried into repute by deception, and kept up by the same arts. The patentee of it was originally a farrier, ignorant in the extreme, but possessing a species of cunning in contriving to get attestations from those who knew not what they were doing, or the consequences to which such attestations lead. That consumption of the lungs was ever cured by Godbold's Balsam, nothing but the most consummate ignorance could suppose; and if such attestations were made equally actionable as those for giving false characters, the titled names prostituted to such purposes would soon vanish from the posts and pillars on which they are so conspicuously placed, to record their infirmities, and hand them to public gaze and entertainment as unhappy invalids. We understand that the original inventor, Mr. Godbold, could hardly write his name, and the epistolary correspondence of those who addressed his patients for him, seems also to betray strong marks of an untutored mind. This medicine has now had its day, and is only kept up by the old testimonies.

CRAMOR'S BALSAM OF ICELAND LIVERWORT.

A MORE modern antiphthisical specific is the Iceland Liverwort. This is a deception, being nothing more than the oxymel of squills flavoured with the essential oil of anise and carraway. It is introduced to notice by a long dissertation on the subject, in which the virtues of the Liverwort are amply detailed, though not a particle of it enters the present composition; and the mode of preparation is carefully concealed by the author.

"Fearful that the invaluable properties of the Iceland Liverwort might be *much impaired*, or totally destroyed, I have thought proper," says the proprietor, "to conceal its process and combination, upon the very careful preparation of which depends its efficacy, its consequent *reputation*, and

my *veracity;* but when such regulations take place in the profession that the different departments be strictly observed, I shall with pleasure divulge it."

REGNAULT'S SYRUP AND LOZENGES OF ICELAND LIVERWORT.

THE Iceland Liverwort is merely a mucilaginous vegetable with some degree of bitter. Its powers are accordingly too trifling to be supposed capable of acting with any energetic operation on the system; and the idea of concentrating its virtues are too ridiculous to be talked of. In that state it can possess no property which does not belong to common fecula or starch, and no higher can we rate its virtues. If any benefit is to be derived from it, which can be no greater than what is derived from other mucilaginous plants, as the mallows, &c. the decoction is certainly the best form. But the idea of its having any specific operation or quality on the lungs hardly deserves notice.

ALLEN'S PECTORAL BALSAM OF LIQUORICE.

THIS composition, the author informs us, " is *an elegant preparation from the simple and invaluable root from whence it derives its name*, so *remarkably* concentrated that a small bottle contains all the specific pectoral virtues of a whole pound of stick liquorice, completely divested of its gross and superfluous parts." The declaration of this fact is attested by the proprietor on oath. How must we be surprised, then, to find, instead of liquorice, a harmless vegetable production, it contains only the Paregoric Elixir combined with the warm essential oil of aniseeds. The essential oil seems a favourite one in pectoral complaints with most empirics, and enters into most of their forms, though we cannot see on what principle. The exhibition of opiates in consumption is at all times a dangerous practice, and only to be had recourse to as a palliative in certain circumstances. The indiscriminate use, therefore, of such remedies cannot be too strongly inveighed against, and the opinion of a popular writer on this point deserves much commendation:

"Most of the nostrums advertised," he observes, "as cough drops, &c. are preparations of opium, similar to the paregoric elixir of the shops, but disguised and rendered more deleterious by the addition of aromatic and healing gums; the injury which may be occasioned by the indiscriminate employment of such medicines in this disease may be very considerable, as is well known by every person possessing even the smallest share of medical knowledge."

PERRIN'S BALSAM OF LUNGWORT.

BALSAM is a favourable title to every medicine where a soothing quality is required in the idea of the vender; and therefore it has been extensively applied to remedies for diseases of the lungs. But the present medicine not only takes advantage of this favourite title, but also adds the name of Lungwort itself—a vegetable supposed, in former days, to have a specific influence on the lungs. The balsam prepared from this source is introduced to public notice by the following observations: "that it is accurately prepared on the most *approved chemical* principles, contains all the essential virtues of this celebrated and invaluable gift of nature divested of its inert parts—is rendered perfectly pleasing to the taste, has been found in numberless instances to produce all the good effects its warmest advocates can promise, or the most afflicted deserve. As a *cough medicine*, it is unequalled by any in the known world, and it is hoped will prove a blessing to the present and future generations!!!"

To prepare the lungwort, and give it such concentration, is impossible. It is merely a mucilaginous vegetable, and Mr. Perrin has taken an active preparation well known, which he has newly christened with this name. This is nothing more than the Paregoric Elixir in its usual form. On the use of such opiates we have said enough in the former article.

PECTORAL BALSAM OF HONEY.

THIS is the production of the celebrated Sir John Hill,

who, with considerable abilities, ingenuity, and learning, descended at last to the character of a Quack. The balsamic qualities of honey, he knew, was a favourite popular idea; and though such a preparation, it is well known, is impossible, a substitute in the fragrant smell and appearance, he knew, could be had in the tincture of Tolu and Benzoin. This is therefore the true advertised Balsam of Honey; and, like all the other balsams which are of a heating and stimulant nature, instead of alleviating the symptoms of consumption, they tend, by increasing the quantity of pus, to aggravate the disease.

The medicine is introduced by the following eulogium on Sir John Hill, and a long detail of the merits of the preparation:

"The Linnæus of Britain (for such was Sir John Hill emphatically called) recommends this excellent preparation, as the most salutary and effectual remedy for recent colds, obstinate coughs, sore throats, difficulty of breathing, asthmas, catarrhs, and all disorders of the breast and lungs. Congealed phlegm, acrimony in the fluids and obstructions in the glands, are gently and safely discharged by easy expectoration, wheezings, and uneasiness in breathing are speedily removed by a few doses. It takes off the irritation, opens the thoracic duct, and heals the soreness of the breast and lungs. Thirty years experience has confirmed the recommendation in the immediate relief and gradual cure of coughs, colds, asthmas and consumptions. It is the greatest preserver of the lungs ever discovered, and contains all the healing, softening and soothing qualities of that salubrious extract of flowers, called honey, and the richest balsams of the eastern world; it is as restorative as asses' milk, and never disagrees with the stomach; a common cold yields to its benign influence in a few hours; and when resorted to, before the complaint is far advanced, all danger of consumption is certainly prevented.

"Obstinate coughs, confirmed asthmas, and consumptive

complaints, yield to the influence of this great medicine; in fact, it needs only a trial to convince the most incredulous of its unrivalled properties. Such are the faint outlines of the merits of Sir John Hill's Balsam of Honey, the result of long researches into nature by that great botanist, who dedicated his life to the discovery of the true means of health in the vegetable kingdom."

The example thus set by Sir John Hill has been universally practised; and there is almost no vender who does not deal in the Pectoral Balsam of Honey drawn from this source. One person, of the name of Cundell, has even pretended to improve it; but where the improvement lies we cannot discover.

HOPE'S HECTIC, OR RATHER ANTI-HECTIC, PILLS.

This is a medicine said to be brought forward by the author on philanthropic principles; and, in the idea of its inventor, is a discovery of equal importance with vaccination. It is a discovery of old times, the recipe being so antient that the writing was rendered yellow by age. On examination, it appears to be nothing more than the Pectoral Horse Balls of the Farrier. It is more common to apply regular medicine to the veterinary art, than to transfer veterinary practice to the human body. It has indeed been done externally in the Black Oil of Barnet Guest; but it has not been ventured on before internally, especially in a disease of such a dangerous nature as pulmonary consumption. As we have not heard much of late of Mr. Hope's specific, in spite of his boasts, and even challenge held out, we suppose it has returned to the senility from which his anile understanding and ignorance first drew it.

PNEUMATIC PULMONARY PRACTICE

To be introduced in our next number.

REGULAR PRACTICE.

I. MEDICINE.

THE important subjects which have for some time so much occupied public attention, still continue to proceed.

HYDROPHOBIA.

THE first of these, Hydrophobia, has now engaged the interference of the legislature, who, by a letter to the College, noticed in our last, has directed a Report to be made, and every information to be promulgated on the subject. The College, with a becoming zeal, have requested information from the Profession at large; and we have no doubt, that much valuable knowledge will be brought forward by these means. At present, any report by the College, as far as we can judge by those members of it who are Physicians to the Public Hospitals, could only be a recital of unsuccessful practice, and fruitless precautions. We would wish particularly to direct the attention of the College to procure information from those concerned in veterinary medicine, and in the cure and diseases of the animals. This information can be afterwards regulated by proper views of science. Hydrophobia is a subject on which we cannot reason, because we have no facts on which to build. We want here a *specific*, if such can be procured, and the College should here proceed on the saying of the noted Paracelsus, "that he would take a remedy from any quarter, even from the *Devil* himself." The importance of this subject has brought a detail of some farther cases since our last before the public. The first of these is given by Mr. Hardwick, of Wenslow, in order to shew the inefficacy of the local application of caustic at the distance of 26 hours after the accident.

"A boy, 10 years old, was bitten in the lip by a dog, with which he was accustomed to play. This happened in the evening. The boy was brought to me the next night, but,

from a gross misrepresentation on the part of his parent, no notice was taken of it till the following morning. Caustic was then applied, and repeated for several days. It was at last discontinued, and the parts allowed to cicatrize. Ten weeks from this time the disease appeared, and terminated fatally on the fifth day. I should be happy to relate the case at full, but regular notes were not taken. The case was witnessed by many professional men of the first respectability. I hope it will not be deemed presumptuous, if I here object to the practice of frequently endeavouring to make the unfortunate patient swallow liquids. To be sure we sometimes succeed in getting a little down, but is not the attempt attended with worse consequences, than we can possibly derive benefit from it? I cannot help thinking it cruel in the extreme, and fear that the experiment has been made more from motives of curiosity on the part of the practitioner, than from any expectation of serving the patient. Surely it is our duty to sacrifice every selfish motive, and humanity forbids the repetition of this painful trial. It is a comfortable reflection that antidotes have been found for many animal poisons; this is sufficient to inspire the hope, that accident will some day afford us a remedy for hydrophobia; I say accident, because it is chiefly to accident that we are indebted for antidotes to other poisons. Improved as the science of physiology is, it does not afford us one satisfactory theory on the nature of this disease. We see its phenomena, but cannot trace them to their cause. We endeavour to explain them by the rationale of other diseases (in which by the bye we are too often foiled), but are lost in the very attempt. One train of thought leads us on to another, till we find ourselves at a greater distance from our object than when we first set out. A dark mysterious veil enwraps the subject, which our present impotent exertions have been unable to remove. On accident therefore I ground this hope, the most fragile footing I can find, but,

like the drowning victim, I catch at a straw, I anticipate a hope which present facts will scarcely authorize."

The second case, from the pen of Dr. Pinckard, is detailed in a very particular manner; and on that account, like Dr. Powel's, is worthy of being inserted, and of contrasting it with Dr. Powel's:

CASE OF HYDROPHOBIA, BY DR. PINCKARD.

"William Waters, of Chipping Barnet, Herts, a sawyer, aged 25 years, a strong healthy man, married, and father of one child, was bitten on the 14th day of September last, close above the upper joint of the little finger of the left hand, by a strange dog, which he met running upon the public road between Barnet and Whetstone. The wound was deep, and the laceration extensive. He applied to Mr. Lloyd, a surgeon at Barnet; and, no suspicion of madness being entertained, the common treatment, as in other recent wounds, was employed. The cure proceeded without any circumstance worthy of particular remark, leaving an eschar about an inch in length. No provocation was given to the dog; nor has any opportunity occurred of ascertaining whether or not he was affected with rabies.

"On Friday the 26th of November, seventy-three days from the time of the accident, the man felt slightly indisposed, and returned home from work, without having eaten his usual dinner; but it was observed that he drank a draught of porter. About eight o'clock in the evening he called upon Mr. Lloyd, complaining of a severe pain in his left shoulder, saying he could not raise his arm to his head. Both the surgeon and himself considered it to be rheumatism. A bolus of pulvis ipecacuanhæ compositus was accordingly prescribed, to be taken at bed-time, and he was directed to rub the part with a spirituous embrocation; but, feeling himself much worse after he went to bed, he sent, about eleven o'clock, for Mr. Lloyd to visit him,

when he still complained of the pain in the shoulder, adding, that he was distressed likewise with "the wind."—Another of the boluses was administered, which he swallowed with difficulty, and he was advised to take some warm wine and water; but he put it away, saying that he could not drink it. Mr. Lloyd felt less satisfied respecting the nature of the disease than when he saw him in the evening, but no suspicion yet arose that it might be hydrophobia.

"During the night he remained extremely restless, and groaned so as to disturb the family in the adjoining house; but the pain of the shoulder subsided, leaving, as he expressed it, "a tightness and choaking about the throat," which increased to an alarming degree. Between seven and eight o'clock the following morning Mr. Lloyd repeated his visit, when he found him in a state of extreme agitation, with a sense of constriction about the throat, and great uneasiness and oppression at the epigastric region. His respiration was irregular and convulsive, and he had frequent eructations of flatus. In order to obtain relief from the difficulty of breathing and sense of suffocation, he had placed himself upon his knees and elbows in bed. Some water being offered him to drink, he suddenly started with terror and alarm, was thrown into violent convulsive distortions, looked offended, and said he could not take it.

"The nature of the disease being no longer doubtful, Mr. Lloyd had immediate recourse to mercurial friction. About three ounces of the unguentum hydrargyri fortius, mixed with camphire, were rubbed in by three persons upon the extensive surface of the neck and thorax, the patient himself assisting. This process was continued until he felt greatly exhausted. He then begged to be left quiet, saying that he was better. His pulse was at this time languid and feeble. After he was a little rested, about two ounces more of the ointment, mixed with opium, were rubbed into the legs and thighs; the fric-

tion being continued until it was interrupted by excessive agitation, and general convulsions.

" The violent symptoms of this most dreadful of all human calamities now increased rapidly. Any liquid was an object of perfect horror to him; the moving of it in a basin, pouring it from one vessel into another, splashing it about the room, placing it before his eyes, or even speaking of it, produced inconceivable agitation, accompanied with a pecular expression of terror, and a dreadful distortion of the whole frame. Some water being presented to him, he was instantly seized with convulsions, sprung up suddenly, and leaped out of bed, throwing himself from the very sight of the basin. At this period of the disease, the convulsions recurred in rapid succession; a considerable quantity of frothy saliva issued from his mouth, he uttered hideous and indescribable groans, looked trembling and terrified, and a marked expression of horror settled upon his countenance. Soon afterwards it was observed, that his urine passed involuntarily; he complained more and more of the " wind and choaking ;" the general agitation and restlessness increased: the convulsions grew stronger and stronger, and the groans and screams louder, and more frightfully distressing.

" Between ten and eleven o'clock he was quite outrageous; and the convulsions being so powerful that four people were unable to hold him in bed, it was deemed expedient to have recourse to a straight waistcoat. During the violence of the convulsions, one of the persons, who was holding him, said that he attempted to bite him; but he immediately apologised, observing, that he did not mean to hurt him; and Mr. Lloyd, who witnessed this circumstance, believed it to be accidental rather than intentional.

" The cicatrix produced by the wound upon the hand was examined, and the nature of the malady was openly talked of by the crowd of persons who came into the room;

but; instead of feeling any apprehension upon the subject, he would not admit that the disease was in any way connected with the bite he had received. He persisted in calling it "the wind," but expressed himself conscious that he could "never recover." No change could be perceived in the part which had been bitten, except that the scar appeared slightly livid, as if it were from cold. It was neither swelled nor inflamed; nor was there any tumour, inflammation, or soreness in the glands of the axilla: but, on being questioned particularly respecting the state of the limb, he remarked that he had felt a sense of cold or numbness in the hand and arm, for two or three days previous to his being unwell; and that he had covered the bitten part again with a "thumb stall," which he had used for some time after the wound had healed.

"The restlessness, terror, extreme agitation, and strong convulsions continued until noon; the convulsions recurring with excessive violence at intervals of only two or three minutes, and from the slightest irritation; mostly from the sight, the sound, or only hearing the name of water. About one o'clock he became more calm, and it was perceived that the horror and aversion to liquids were in some degree diminished. Soon after, he was prevailed upon to swallow two drachms of the tincture of opium.

"It was between seven and eight o'clock in the evening of the 27th of November when I first saw him. Messrs. Lloyd, Rumbold, Booth, and Morrison, medical practitioners at Barnet, were present. He was then lying in a straight waistcoat, extended upon his back, with his hands and feet fastened to the bedstead. He was tranquil and composed; his countenance was natural, and his intellects undisturbed. To the questions which were asked him, he replied in a collected and rational manner; and he was sensible of all that passed in the room. His skin was of natural warmth, and covered with a moderate perspiration. The pulse did not exceed 90 in a minute: it was obtuse and undulating. On pressing his

wrist with the fingers, the artery was perceived to be slightly tremulous. The tongue was moist, and, although whitish, nearly of a natural appearance; the eye looked rather flat and clouded. The convulsions had ceased; the dread of liquids was removed, and he frequently called for water to drink: but he had still a great source of terror and agitation from a peculiar sensibility to currents of air falling upon his skin; and to the impresion of odours upon the olfactory organs. The senses of feeling and smelling seemed to be preternaturally increased. He had no pain, but was extremely distressed with flatulency. His respiration very much resembled that of a female in a paroxysm of hysteria. It was accompanied with frequent irregular sighing, and almost constant eructations of wind. On my asking him to describe his feelings, he said, "I am better, much better; I have no complaint but the wind and choaking;" and upon my loosening one of his hands, in order that he might accurately describe the parts most affected by constriction, he pointed distinctly to the throat and epigastrium.

"It was distressing to observe the anxiety and the frequency with which he now called for water; yet I observed that he never took it by deliberate drinking, so as to bring the organs of deglutition into any number of successive actions. Each time it was given to him, he seized the cup eagerly, both with his lips and his hand, made one convulsive swallow, then hastily pushed away the vessel, saying, if the person who held it chanced to press it longer to his lips, that he gave him "too much," and would "choak" him. Several loud eructations of air usually followed the swallowing of the water, and he remarked, that he drank it because it "broke the wind, and eased" him. For a short time after obtaining this relief his breathing was less disturbed, and he conversed with all the calmness of a person in sound health; but soon the spasmodic feeling about the throat and stomach increased, the respiration was oppressed, and he again called anxiously for "drink to

move the wind," as he expressed it. On my giving him some wine in the water, he said it relieved him more than the water alone; but he begged that it might not be made strong; observing that if it were he could not swallow it.

"Next to his anxiety for frequent drinking, the greatest distress that he suffered proceeded from the opening and shutting of the chamber door: which, indeed, was the most characteristic symptom at this stage of the disease. He was more watchful, regarding the door, than concerning any other object. Whenever it was moved, he started in great agitation, looked terrified, and impatiently called out "the door, the door;" and although he neither saw nor heard it opened, so acutely sensible was he of the slightest current of air, that he instantly knew from his own sensations, when any person entered or left the room. The slightest current of the breath falling upon his face from any person who was speaking to him; air blown from the lips upon his breast, and the fanning of a hat across his chest or throat produced great agitation, together with convulsive breathing, and a sense of suffocation: but the same effect was not observed from waving a hat across his feet and legs; nor from suddenly sprinkling a few drops of cold water upon his face or thorax. A candle was held near to his eyes, but he expressed no uneasiness from the light of it. He had a dread of any person standing near his face; also of any substance being put in motion near his mouth; and of any thing strong or volatile being applied to his nose. He seemed likewise to have a terror respecting the moving, or in any way disturbing his person. He expressed himself satisfied to lie fastened in the waistcoat; and when his hand was released, said that it gave him no relief. He swallowed the water, lying upon his back, with the head low; and refused to be raised, when it was proposed to lift him up to drink it; he complained of the wind produced by a handkerchief, which was used to wipe the saliva from his lips; and he was

greatly disturbed by the smell of a cloth which happened to be placed upon the bed, after being used by one of the persons who had been employed to rub in the ointment with camphire. Once some wine was offered to him, instead of the wine and water, but, when it approached his nose, he suddenly refused it, saying, impetuously, "it is too strong, I cannot drink it." Between nine and ten o'clock he requested to see his wife and child, when he tenderly pressed the hand of the mother, but anxiously desired her not to put the child near his mouth; manifestly, not from any apprehension of injuring the child, but from a dread of the air being disturbed about his face.

"The tincture of opium was directed to be repeated every hour, in doses of half a drachm, combined with a scruple of the oleum succini rectificatum. He took it three times, but it did not appear to have any influence whatever upon the symptoms, and he complained that it was strong, and made him worse.

"At midnight, upon observing a person in the room eating roasted apples, he requested to have some, and ate nearly two of them, with seeming gratification. He then said that his stomach was "restored," and, feeling as if he could eat something more, desired to have a "beef-steak for supper." This was accordingly prepared, and he chewed two or three morsels, but did not swallow them.

"About one o'clock in the morning of November 28th, the high susceptibility, and the dread of currents of air left him, and he desired to have the door and window set open. He now remarked that he was much worse; requested to be released from the confinement of the waistcoat: and said, impressively, that he should "soon be gone." His eagerness for water became quite insatiable, and although his stomach now began to reject it by vomiting, he called for it incessantly. On one of the by-standers asking him if he were not afraid that so much water might do him harm, he replied

"No, I feel it running off as I drink it;" proving, that although his urine passed involuntarily, it was not without consciousness. He likewise desired to have cold water applied to his nose; and his impatience for it increased to such a degree that two persons found full employment in wetting his nostrils, and giving him water into his mouth. Before two o'clock he expressed a similar eagerness and impatience for air, asked those near the bed to blow upon him, and desired every person to stand away from the door, that he might feel the cold current. He remained perfectly sensible (as he had been throughout the whole of the disease), and without any return of convulsions, until nearly three o'clock, when he expired; his last moments being marked with calmness and composure.

"Very soon after death a number of dark red, or livid blotches appeared about the throat and clavicles; and the abdomen became tense, and much enlarged.

"APPEARANCES ON DISSECTION.

"On opening the head, the dura mater adhered so strongly to the cranium, that great force was required to separate them. The whole surface of this membrane appeared in a state of unusual dryness, and was more free than is common from small red points, or exudations of blood. The vessels of the pia mater were not overcharged with blood.

"The brain was remarkably close and firm in its texture. A peculiar dryness was observed throughout the whole of its substance. The cerebrum appeared beautifully white, and had not those numerous red points which are usually observed. When cutting the cortical and medullary portions, they both opposed a strong resistance to the knife; they also preserved their form under considerable pressure from the finger. A small quantity of colourless fluid was contained in the ventricles.

"On cutting through the integuments and muscles of the thorax, to turn them back, for the purpose of exposing the

ribs and sternum, the whole fleshy substance was observed to be in a state of unusual dryness.

" The viscera of the thorax had a healthy appearance. The lungs were fully distended with air. There was a general dryness upon the surface of the pleura. The pericardium contained about half an ounce of fluid.

" The posterior part of the tongue, the outer surface of the epiglottis, and the whole of the pharynx, exhibited strong marks of inflammation: some degree of redness was also observable, although not so conspicuous within the larynx, and upon the surface of the trachea and œsophagus. At the lower part of the œsophagus, about half an inch from the cardiac orifice of the stomach, was an eroded spot, nearly the size of a shilling, assuming an appearance as if the inner coat had been separated and shrivelled up by scorching.

" The stomach and intestines were much distended with flatus. Their exterior coats, also the peritonæum covering the other parts of the cavity of the abdomen, and likewise the diaphragm, were in a state of dryness similar to the pleura. The rugæ of the inner coat of the stomach were numerous, large, and very distinct. A few inches below the cardia was a fulness of the vessels of the villous coat, which caused a spotted and circumscribed redness about three or four inches in diameter.

" The liver and spleen were of a light or ash-coloured hue; in other respects of a healthy appearance.

" The general dryness which prevailed in the fibres of the muscles, within the substance of the brain, and upon the membranous surfaces, extended likewise to the omentum, which, when pressed in the hand, felt like a loose net of packthread.

" It is proper to remark, that the stomach, the œsophagus, and the trachea, were not only carefully inspected by Mr. Lloyd, Mr. Booth, and myself upon the spot, but that they were taken from the body and brought to London, where

they were farther examined by Mr. Blair and Mr. Dixon, who are much in the habit of inspecting bodies by dissection; and that both these gentlemen, without any communication with each other upon the subject, favoured me with a written statement of the appearances they observed, previous to their receiving any intimation that the parts were taken from a person who had died of hydrophobia.

"These parts were also examined several successive days, after being immersed in water. The redness of the pharynx was darker and stronger, and assumed a livid hue, as the membrane became corrugated; but the redness of the membranes lining the trachea and œsophagus, went off soon after the parts were put into water. There was not the slightest appearance of coagulum, exudation, or adventitious membrane, in any part of the pharynx or larynx; nor throughout the whole extent of the œsophagus or trachea.

"The body was examined twenty-nine hours after death.

"The disease continued about thirty-eight hours from the time when the man first became sensible of indisposition.

"Observing the progress of the symptoms, as they occurred in this case, the disease might be divided, with tolerable accuracy, into several distinct periods, or stages, viz.

"1. A sensation of cold and numbness about the wound, and throughout the hand and arm—during two or three days.

"2. A severe pain of the shoulder, with undefined general disposition—about ten hours.

"3. Horror of liquids, with violent convulsions and distortions—fourteen or fifteen hours.

"4. Comparative tranquillity, with a desire for water, and a dread of currents of air—nearly twelve hours.

"5. An insatiable craving for air and water—between two and three hours. G. PINCKARD.

"*Bloomsbury Square, Nov.* 30, 1808."

VACCINATION

Has made little progress during the last month. The failures of Sir Isaac Pennington have made no impression on the College. Eight of his cases, it is said, were submitted to the Jennerian Deputation when at Cambridge, and a statement, different from Sir Isaac's, is expected from that quarter. In the mean time, some misunderstanding is said to prevail among certain leading members of the Jennerian Society; and we understand the College have it in contemplation to establish an institution of their own, with the view to enable them to make a second Report, so that all popular prejudices and professional doubts may be done away on the ultimate merits of the discovery.

PURPURA.

Some observations of Dr. Parry, of Bath, on the treatment of Purpura, tend to shew, that in many diseases of acknowledged debility, such may be the state of certain blood-vessels, from an over-distension, that venesection is required, though this over-distension arises probably from their relative want of tone, or the due contraction of their muscular fibres; and wherever evidence exists, from the apparent symptoms of purpura, or even scurvy, that the case, whatever term or appellation it may receive, is of an active hæmorrhagic nature, it matters not, he contends, in a pathological view, whether febrile extravasation of blood takes place from the rupture or gaping of an artery in the cellular membrane in the skin, or on the surface of the epithelion in the nose, fauces, or bronchiæ, bleeding is the remedy in the first instance.

CRETINISM.

Cretinism, or that species of bodily deformity and mental imbecility, which marks the lower orders in certain districts of Switzerland, more than elsewhere, has received some elucidation from the late experience of Dr. Reeve, of

Norwich; and he has endeavoured to point out a connection between this afflicting malady and rickets.

"The enlargement," he observes, "of the thyroid gland called goitre, is the most striking feature in the unsightly aspect of a cretin; but this is not a constant attendant. His head also is deformed, his stature diminutive, his complexion sickly, his countenance vacant and destitute of meaning, his lips and eye-lids coarse and prominent, his skin wrinkled and pendulous, his muscles loose and flabby. The qualities of his mind correspond to the deranged state of the body which it inhabits; and cretinism prevails in all the intermediate degrees, from excessive stupidity to complete fatuity."

There is no necessary connection, however, between the swelling of the thyroid gland and cretinism, though they frequently exist together.

"It is probable," he remarks, "the one has been assumed as the cause of the other, from the enlargement of the thyroid gland being a frequent occurrence in cretins; and as it forcibly strikes the observer from the deformity it occasions, this strong impression may have converted an accidental, though frequent occurrence, into a general and necessary cause. Cretinism is frequently observed without any affection of the thyroid gland, and that gland is often very much enlarged without any affection of the intellectual faculties. There seems to be some similarity between cretinism and rickets, as they both take place in infancy, are both characterized by feebleness of body, and sooner or later by feebleness of mind, and they both affect males and females equally; but there is no sort of connection between persons afflicted with bronchocele in England, and with rickets. For although it might be granted, that there is some delicacy of frame in females about the period of pubescence, when bronchocele usually occurs, yet neither irregular formation of the bones, nor

weakness of the intellectual powers, are common symptoms attending bronchocele in Britain.

" The production of cretinism, by the bad quality of the air and the food, the neglect of moral education, and other evils attendant upon poverty, is supported by facts so pointed, that the greater number of cases in mountainous districts where snow water abounds, may safely be ascribed to these general causes. The notion of snow-water being the cause of goitre, and consequently of cretinism, seems to have been derived from Pliny (Lib. II. cap. 37), and copied by almost every succeeding writer, because it coincided with their hypotheses of cold and crude matters, although directly contradicted by facts. In the first place, persons born in places contiguous to the glaciers, who drink no other water than what flows from the melting of ice and snow, are not subject to this disorder; and, secondly, the disorder is observed in places where snow is unknown.

" The causes of cretinism begin to operate upon the system soon after, perhaps even before birth; the want of energy in the parent is communicated to the offspring; the children become deformed and cachetic very early in life, the growth and developement of the body are impeded, the abdomen becomes enlarged, and the glands swelled in various degrees; and the powers of the mind remain dormant, or become entirely obliterated, partly from want of proper organization, and partly from the total neglect of every thing like education.

" It might be expected, that the dissection of cretins would throw some light upon the series of phenomena associated together in the origin and progress of this singular affection; but the people are so superstitious, that it is very difficult to procure bodies for anatomical examination. However, some dissections have been made, and the appearances in the cranium are very curious. From the description of a cretin's

skull by Ackermann, it appears that the cavity for the reception of the pons varolii and medulla oblongata was completely obliterated, and that, in which the cerebellum is lodged, so much diminished, that it scarcely exceeded one third of its natural capacity. The return of the venous blood must have been considerably impeded by the mal-conformation of the foramina.

" There is no fact in the natural history of man, that affords an argument so direct and so impressive, in proof of the influence of physical causes on the mind, as cretinism. It shews moreover, that the growth of every part is essentially connected with the conditions in which it is fit to exercise its peculiar functions: and in this respect, it fares with the intellectual as with the bodily powers.

" The most decisive argument in proof of this opinion is, that cretinism may be prevented by removing children from the confined and dirty places where it prevails, and nursing and educating them in the higher parts of the mountains. Within these last ten years, the number of cretins has diminished, the condition of the lowest class of society is somewhat bettered, and more attention is paid towards that diseased constitution which is the forerunner of mental imbecility. I did not find that the poor creatures took any pride in having any of their children idiots or *bien heureux*, as some authors assert; on the contrary, the parents were very much ashamed of acknowledging that any cretins belonged to their families; and it was after repeated attempts, only by declaring myself to be a physician, that I could get access into their houses to examine any of these wretched beings in the human form. The burnt sponge is known as a remedy for the goitre among the people where it is most prevalent; but it is seldom administered, because the disease is so common, that it does not attract notice, nor affect, in general, the ordinary functions of life. And as to cretinism, that seems to be looked upon as belonging to indigence and poverty; for in every place where I

saw cretins, many well-looking persons of both sexes resided, and these were, without exception, persons of a higher class in society, who lived in better houses, and could supply both their moral and physical necessities.

" I might perhaps have insisted more upon the analogy between cretinism and rickets, for there is a remarkable coincidence in the literary history of these two diseases, as well as in many other points. Glisson first described rickets, as it appeared in this country, in the middle of the seventeenth century, about the same time that Plater mentions cretinism. The origin of both names is equally obscure; and since some of the remote causes are now discovered, it is to be hoped the diseases themselves will gradually disappear, and in some happier age be known only by description."

ANIMAL HEAT.

THE subject of animal heat is one of principal importance in all inquiries into the nature of the animal œconomy. Some experiments have been lately made by Dr. J. A. Paris, to prove that the quantity of it present in the secreted fluids is less than in the blood, and that the secreted fluids being mere chemical compounds, formed by the glands from the principles of the blood, in proportion as the capacity of the fluids is less for caloric, a considerable source is created for the production of animal heat, and consequently that the secreting process is a great instrument in its production.

" The sums of the secretions," it is observed, " is commonly the same; for if any single secretion suffers a change in quantity, we shall find the others varying so as to preserve the same general effect; thus, for instance, if the urine flows with greater abundance, the saliva or perspirable matter is secreted less copiously; if, however, a universal cause affects the body, so as to diminish all its secretions, we find the animal temperature sinks, as is exemplified by sleep, or the influence of the depressing passions."

The experiments on which this opinion is founded, are thus detailed—

"EXPERIMENT I.

Temperature of the Laboratory 46° Fah.		
Of urine 1 pint was heated to 65°	} Arithmetic mean	
Of water - - - - - - -	113 }	89.
Temperature that resulted -	90	
Escaped during the experiment	2	
True temperature - - - -	92	

From the above results it appears that the water has been deprived of 21° of heat, which has raised the urine 27°, from which it is evident that the capacity of urine is to that of water as 21 : 27 or as 7 : 9. Hence let x represent the capacity of urine, and 1·000 that of water; then

$$7 : 9 : : x : 1.000$$
$$9x = 7.$$
$$\therefore x = \tfrac{7}{9} = \cdot 7777;$$

whereas the capacity of arterial blood is 1.003."

IMPROVEMENT OF DISPENSARIES.

NOTHING has tended so much to benefit the profession by an extensive experience in the appearances and treatment of diseases as the Medical Charities of the metropolis. They are the proper schools for tracing the picture of the morbid state in all its varieties, and for forming the young practitioner for the exercise of the healing heart. Every improvement, then, suggested for rendering the treatment there more successful, claims the attention of the faculty, and the gratitude of society. Dr. Herdman, Physician to the City Dispensary, has, on this principle, addressed his suggestions to the Society for bettering the condition of the Poor, on the present state of the Dispensaries, or inferior charities, which he introduces by his opinions of the principles of pathology drawn from the Brunonian source, and applies them to shew the necessity for the

aid of diet being conjoined with that of medicine, in order that these charities may successfully answer their intended end. The plan of effecting this forms also one part of his address. We give Dr. Herdman every credit for his benevolent intentions. The advantage and propriety of them cannot be disputed, provided they could be readily put in practice; but such a plan, we are afraid, will be considered as making the Dispensaries Hospitals; and the sum to be raised would greatly circumscribe the number of these institutions by requiring double the amount to support one that is at present requisite. Something of a similar plan was suggested some years ago by an ingenious surgeon, Mr. Carlisle, in respect to convalescents. The regulations of the hospitals require commonly the dismission of patients before health is so far renovated, that the patient, generally in low circumstances, can resume his usual occupation for his support. An establishment, therefore, under the title of an Hospital for Convalescents, was proposed for that purpose, where the patients might remain, and be supplied till they were able to earn their own living. This, however, like many other philanthropic schemes, proved abortive; and the same, we fear, will be the fate also of Dr. Herdman's present attempt.

INCREASE OF MORTALITY.

Consumption of the Lungs being the most prominent malady of this climate, an attempt to trace its increase of late years has been made by Dr. Woollcombe, and for this he has referred to the records of the Plymouth Dispensary. In this research he has been led into a view of the increase of mortality in general; and from the statements he has made, in consequence of a reference to the bills of mortality, the following facts are made out:

"From these documents it appears that two conclusions may be drawn: 1st, that the number of deaths from consumption towards the end was greater than at the beginning of the last century; and 2d, that of the whole number who

died during the century, those from consumption bore a larger proportion at the end than at the beginning. In other words the absolute and relative mortality of consumption seems to have increased. In viewing these conslusions however, we must not overlook two possible sources of error. In the first place, according to the returns of Mr. Addington's Act to ascertain the population of this kingdom, it appeared, that during the whole of last century the number of inhabitants was continually augmenting, and was therefore much greater at the end than at the beginning of the century. The increased number of deaths from consumption, therefore, might depend on the increased number of inhabitants, and not upon any increase in its frequency and fatality, in the same mass of population: cousumption might devour more victims merely because there were more to be devoured. In the second place, we may err, if we suppose that consumption is on the increase, because, of the whole number of deaths, those from this disease form a larger proportion at the end than at the beginning of the century; for the various modern improvements in the prevention and cure of diseases, have most probably diminished the frequency and fatality of some diseases, and the proportion of deaths from consumption may seem to have increased."

To remove any objections to these facts from a better treatment, and lessened mortality from other diseases, rendering it from consumption more prominent, also to obviate any arguments from an increased population, Dr. Woollcombe thus proceeds:

"If, for example, the inhabitants of this country had, in the year 1700, been six millions, the proportion of mortality one in forty, and the proportion of consumptive mortality one to six, the total deaths would have been 150,000, and those from the disease under consideration 25,000. If in the year 1800, the inhabitants had been the same in number, and the deaths from consumption had been known to

have increased relatively one-third, or to be in the ratio of one to four, still might there have been no increase in the absolute fatality of consumption; but a reduction of the general mortality might have taken place in the same proportion, so as to have become as one to sixty; in which case the total mortality would be 100,000, and the consumptive mortality still 25,000. This objection is therefore not without weight, and shews that in order to establish a relative increase of mortality from any disease to be a just measure of its absolute augmentation, we must ascertain the proportion of deaths to the inhabitants of the country at the particular periods between which a comparison is instituted. As this proportion is not, and cannot be ascertained with precision, we must be satisfied with such an approximation to the truth as can be derived from the imperfect evidence found in those authors, who have treated of that branch of political economy with which this question is connected.

"Presuming, for the present, that in the year 1700 the mortality in England, in proportion to its inhabitants, was one to thirty-six; and that the relative increase of consumptive mortality has, in the course of the century, amounted to one-third, or is become as four to six, it follows that there must have been an absolute increase to a certain extent, unless in the same period the proportion of mortality to population has become as 1 to 54. But this supposition is too extravagant to require refutation. It is sufficient to observe, that an uncommon degree of healthiness is attributed to this island, when it is admitted, that the mortality at present may perhaps amount only to 1 in 40. Admitting, however, with a late author, that the last-mentioned proportion is just, let us inquire what the proportion must have been in the year 1700, to account for the difference of the relative mortality of consumption, upon the supposition of there being no absolute increase. In that case we shall be constrained to state the general mortality in 1700 to have been 1 in 27 nearly, which

implies a degree of unhealthiness inconsistent with the known condition of the country at that period. It its obvious, that no such proportion of deaths, as has been stated in these two instances, could have happened without such a corresponding augmentation in the population of the country, as is known not to have occurred, and is altogether extravagant to suppose."

An Inquiry into the Symptoms and Treatment of Carditis; or the Inflammation of the Heart; Illustrated by Cases and Dissections. By John Ford Davis, M.D. Member of the College of Physicians, London; of the Royal Medical Society, Edinburgh; and of other Medical and Philosophical Societies. Small 8vo. pp. 190.

We are somewhat astonished that this particular disease should be selected for the contents of a volume; a disease always undetermined in its action, its character, and termination, and not unfrequently misunderstood for inflammation of the pericardium, and the contiguous parts: in short, a disease so rare, so obscure, and so difficult to ascertain, was not worth the attention Dr. Davis has bestowed upon it; for no practitioner can err in the treatment of this disease, if he follows the general routine of practice in Peritonitis, Gastritis, &c. &c.; therefore, if Dr. Davis had not published these observations, he certainly by us would have most readily been pardoned for his negligence; and when he again appears in the character of a public writer, anxious to obtain the dignified character of a philanthropists, we strongly recommend a reduction of price—six shillings, for so small a volume, on an obscure disease, is too great a privilege, even for a man of merit to make on the sense and pocket of the purchaser. Though Dr. Davis may be Mania Carditis, yet this is no reason why the profession are at his shrine to sacrifice their good sense and property, which

we conceive would be the case, by the purchase of his Treatise. Those who wish to diffuse general knowledge should not cramp their exertions by fixing too great a value on their labours: this is a species of empiricism, which we hold to public derision and general execration, as being incompatible with the noble principle of humanity, and the best interests of society.

Our author begins with informing us, Carditis is one of the most obscure diseases known, and that it occurs oftener than is suspected. After a long train of quotations, in which Latin, Greek, and French, swell the page, he brings us to a point already in the possession of every boy that has attended the lecture-room, viz.

"That an inflammation of the lungs may, from contiguity of parts, spread to the pericardium and heart, and *vice versa;* and thus, according to the particular parts affected, will be the difficulty of breathing, cough, &c."

He then proceeds to consider what the inflammation of the heart is:

"It seems proper to consider the inflammation of the heart and pericardium as only one disease; notwithstanding some authors have made them distinct affections. Sauvages, whose definition of Carditis has been already noticed, ranks the inflammation of the pericardium, as a species of Pleuritis, under the name of Pleuritis Pericardii. Selle preserves the distinction without any reference to the pleura. His definition of the inflammation of the pericardium is, "Dolor punctorius ac gravitus in pectoris parte profundiore: anxietas: palpitatio cordis: perpetua ad tussiendum proclivitas." He adds, "Haud raro accidit ut plurium partium inflammationes simul coexistunt, pro cujus complicationis diversitate alia atque alia phenomena adparent, quorum determinatio sat difficilis est." According to him, *the inflammation of the heart* is distinguished from *that of the pericardium*, by the

absence of the disposition to cough in the former, the definition of which is, " Dolor punctorius sub sterno: palpitatio cordis et anxietates continuæ: pulsus parvus inæqualis: calor exiguus."

" Whether these different affections can ever be distinguished in practice seems very doubtful; their separate existence must, however, be admitted, of which one of the cases to be related presently affords proof, if that were wanting. Dr. Baillie also has seen the substance of the heart inflamed, without any inflammation of the pericardium; and although he says, " whenever the inflammation of the pericardium is violent, the muscular substance of the heart is inflamed to some depth," he does not deny that in slighter inflammation of this membrane the heart may escape. According to him, the symptoms which have been observed, are, " the general affection of the system known by the name of fever; pain in the region of the heart, which is often, but not always, attended with palpitations, and with an irregular pulse; cough; difficulty of breathing; and sometimes syncope." Notwithstanding the high authority from which this description proceeds, it must be allowed to be very unsatisfactory. Nearly all the symptoms, supposed to be present in every case, are common to peripneumony; so that there is scarcely one by which the inflammation of the heart can be distinguished. At the same time it cannot be denied, that this arises more from the difficulty of the subject, than from any neglect or inability of that excellent pathologist.

" Since then Carditis is so often connected with peripneumony, and since the symptoms which more immediately arise from inflammation of the heart, as palpitation, syncope, &c. are not always present; it will, perhaps, be impossible to establish a diagnosis upon solid principles. But let not the obscurity, in which the subject is involved, deter us from attempting its elucidation. Let it rather call forth our greatest exertions; and if we recollect that there was a time, when

that formidable disease, denominated Croup, was as imperfectly known, and as little under our control, as Carditis is at present, we shall not want encouragement to proceed.

" CASE I.

" MASTER W. æt. 7.—Jan. 22, 1785. After having complained of head-ach for a month, was attacked, four days ago, with fever. He had danced on the day preceding this attack. Pulse 140. There is wandering pain affecting sometimes the head, sometimes the leg, and, at others, the heel.

" He has taken thirteen grains of James's Powder in three doses, and a grain of Emetic Tartar in four doses, without vomiting."

" Capiat Pulv. Antim. Jac. gr.v. horis 2dis, ter, cum Mist. camph. efferv.

" Jan. 23. P. 124, and strong. Slept now and then during the night. Acute pain of the ankle; scarcely any of the head. Three stools. Neither nausea nor perspiration from 28 grains of the powder in six doses.

" V. S. ad seven ounces, Capiat Pulv. Antim. Jac. gr. v. horis 3tiis, cum haustu ex Jul. camph. half an ounce, Sp. Minder. two drachms.

" Jan. 24. The blood drawn exhibits a highly inflammatory crust. Bowels have been twice moved by a cathartic, and he has taken 25 grains of the powder, without nausea, vomiting, or perspiration. P. 112—120. The pain of the head is abated. Sleeps occasionally.

" Capiat haustum ex Sp. Minder. Syr. Aurant. āā two drachms, Vin. Antim. gtt. xx. 4tis horis.

" Jan. 25. P. 156. Pain of the head, epigastrium, left side of the chest, and leg. Five stools from the same cathartic, and four ounces more of blood have been drawn.

" Fiat V. S. tertia ad seven ounces (antea ad seven ounces et four ounces) Capiat Nitri gr. x. horis 3tiis. Vesicatorium Epigastrio.

" Jan. 26. There is a very thick and hard crust on the

blood in both cups. Slept quietly several times in the course of the night. P. 136. Delirium in the evening, after he awoke; none in the morning.

" Repr. Mist. cathart. V. S. et dein Nitri gr. x. horis 3tiis.

" 7. p. m. Six ounces of blood were drawn, which nearly occasioned syncope. The blood has a crust one fourth of an inch thick. The symptoms are greatly relieved, but the pulse is now 126. Three stools. Sleeps frequently without any delirium.

" Capiat Nitri gr. x. horis 3tiis. Potus imperialis, &c. copiose.

" Jan. 27, h. 7ma. a. m. P. 90—108. Sleeps much.

" Capiat Haust. efferv.

" Jan. 28, h. 6ta. p. m. Acute pain in the left mamma. Is seldom hot. Sleeps frequently, and moans while awake. Eats sparingly. Has taken the cathartic mixture without effect.

" Injr. Enema. Admoveantur Hirudines sex loco dolenti. Capt. Nitri gr. x. horis 3tiis.

" Jan. 29. Slept well during the night. A copious stool from the clyster. Pain of the thorax much relieved. P. 120.

" Si dolor fixus, admoveantur Hirudines; si vagus, descendat in Balneum. Repr. Mistr. cathart. et post dejectiones capiat Nitri gr. x. horis 3tiis.

" Jan. 30. P. 126. Fingers cold. Wandering pain of the head, side, abdomen, hip, and leg. Two stools. Moaning.

" Habeat Jul. camph. two and a half drachms, Sp. Minder. one and a half drachms, Vin. Antim. gtt. xxv. horis 4tis. Vesicatoria pone aures. Balneum.

" Jan. 31. Slept often during the night. P. 126. Heat natural. Moaning. The Bath afforded little relief. Wandering pain of head, abdomen, and leg. Urine turbid.

" Capiat Infus. Cort. Per. one ounce, horis 2dis. et Rhei gr. v. bis.

" Jan. 31, h. xi. p. m. Took five ounces of the Infusion, and food twice or three times. Better during the day, but is moaning at present. P. 126. Feet and hands cold. Delirium. Wandering pain of the head and abdomen.

" Injr. Enema.

" Feb. 1, h. 8va. a. m. P. 126. Heat natural; but, not long ago, the extremities were nearly cold. Has taken the infusion twice, and some wine and water. Delirium. Moaned and was quiet alternately during the night. Face pale. Swallows with difficulty. Urine deposits a copious white sediment.

" Capiat Infus. Cort. Per.

" Feb. 2. A very restless night, but slept from seven o'clock this morning till one in the afternoon. Symptoms relieved. P. 124. Has taken butter-milk, bread, and wine and water. At four in the morning he took a draught with twenty-five drops of Antimonial Wine and five of Laudanum, and at nine o'clock ten drops of Laudanum.

" Feb. 2, h. 4½ p. m. Died quietly.

" DISSECTION.

" The pericardium was very much inflamed; its external coat much redder and thicker than natural. The internal surface of the pericardium, and external surface of the heart, were much more changed by inflammation; their smooth shining and slippery membranes were rendered rough and unequal; purulent matter covered both surfaces; they were connected by several firm adhesions, and some irregular membranous fragments lay loose in the cavity. The muscular substance of the heart was not diseased.

" The arteries, veins, and sinuses of the dura and pia mater, were turgid with blood, but those membranes did not appear inflamed. The frontal veins and arteries, where the pain was chiefly seated, were less turgid than those of the ver-

tex and occiput. There were about 2 or 3 drachms of serum in the ventricles of the brain. There was no other morbid appearance in the brain, thorax, or abdomen.

" The history of the disorder afforded no suspicion that the heart or pericardium were attacked till the 7th day of the fever."

For the cure of the disease he recommends blood-letting, in conjunction with the fox-glove, mercury, tobacco, cupping, &c.; and then concludes with a

" RECAPITULATION.

" It may not be improper to state briefly the principal inferences, which have been drawn from the facts contained in the foregoing pages.

" 1. Syncope and irregularity of the pulse, which a priori might be supposed to attend Carditis invariably, and which systematic and nosological writers have included in their definitions of this disease, did not occur in either of the cases.

" 2. Palpitation happened in one case, and then only in the advanced stage of the complaint, after adhesion may be supposed to have taken place between the heart and pericardium.

" 3. The usual marks of deep-seated inflammation, as rigor and flushing, were not observed; nor was there so much fever as might reasonably have been expected.

" 4. Delirium, which no author appears to have mentioned as a symptom of this disease, happened in two of the cases.

" 5. Other symptoms, denoting a high degree of nervous excitement, viz. wandering pains, and spasmodic affections of various parts, and even tetanus (not recorded by any author, as far as I know,) are observed to attend the Inflammation of the Heart.

" 6. Vomiting, mentioned by Dr. Darwin as a constant symptom of Carditis, happened in one case.

" 7. So far from being always complicated with Pneumo-

nia, as some authors have asserted, there was no symptom of pneumonic inflammation in two of the cases. In the other, inflammation commenced in the Heart, and was confined to that organ during eight days; after which it extended to the lungs, and the usual symptoms of Pneumonia followed.

" 8. Inflammation may take place within the ventricles, which seems not to have been observed before.

" 9. If there be any pathognomonic symptom, it is the extreme anguish that is felt in the region of the Heart.

" 10. From the relief which followed bloodletting in two of the cases, it is probable, that, if it were employed more freely than has hitherto been done, the disease might be cured."

We think that neither science or humanity will be benefited by the elucidation of this author.

Reports on the Effects of a Peculiar Regimen on Scirrhous Tumours and Cancerous Ulcers. By William Lambe, M.D. Fellow of the Royal College of Physicians.—pp. 190.

To the researches of this author, society and the profession are much indebted; indeed we give our warm applause to every attempt, that has for its immediate object the alleviation of human misery, the *ne plus ultra* of medical investigation. We admire the perseverance Dr. Lambe has displayed amid the strong prejudice which scientific sceptics have insinuated against his judicious practice.

Most assuredly the best interests of society are censulted when medical men give the result of their experimental knowledge, for it is from the observations that knowledge gives rise to, philosophy and humanity hope for improvement and melioration. The principal object of this author is to prove the advantage which distilled water and a vegetable diet has over every other mode of cure in cancer. Some wel

drawn cases elucidate this point, particularly the first, seventh and eight cases. We hope further trial will establish the reputation of this remedy. His arguments are ingenious, and many of his ideas novel: he looks upon man to have been originally an herbivorous animal. And when we recal to our recollection the wandering Pelasgi of Thessaly, who shook the oak and beach for their daily food, we must confess Natural History establishes the doctrine. We recommend the adoption of Dr. Lambe's mode of treatment in conjunction with the medicinal one of Mr. Carmichael. The Cancerous Ward in the Middlesex Hospital is, we understand, to be open for this purpose. In the progress of animal life the body becomes less vascular: the vivid bloom of youth moderates into the hue of middle life, and this into the wrinkled and shrunk appearance of old age: corresponding changes take place in other parts: in short, the livid hue of venous plethora succeeds to the vivid tints of arterial: while the body is undergoing these material revolutions, a mode of diet that is completely opposite from general routine, must be of essential service, even where no previous disease existed; but at the period when menstruation is about to cease, a removal from an alealescent to an acescent diet, we consider of the highest import, and strongly advise its universal adoption, even where cancer or scirrhus are not suspected; in short we recommend this treatise to the attentive perusal of the profession, as a work from which much useful information is to be acquired: for though the same plan is not entirely new, being first produced largely by the famous Friar of Malta, and the same mode of treatment has been put to a trial in this country, by Mr. Pearson, as will be seen in his treatise on Cancer. Dr. Lambe has the merit of carrying it a step farther, by confining the fluid diet to *distilled* instead of *common* water.

The following conclusion he has drawn: that—

"The spreading of the cancerous disease into the contiguous parts is completely prevented by the use of pure distilled water; cancerous tumours can by the same practice be removed by absorption; cancerous ulceration can be prevented; cancerous ulceration can be completely closed up by the basis of the ulcer becoming covered by the surrounding sound skin; in one case, which proved fatal, a part of the ulcer has been brought to cicatrize, but the cicatrization was not permanent; in another, of which the event was similar, all the parts surrounding the principal ulcer were made perfectly sound, and some ulceration firmly cicatrized; that by uniting the use of distilled water to a vegetable diet, life may probably be prolonged to an indefinite extent, even in certain cases of ulcerated Cancer of long standing; and it must follow as a direct consequence of these facts, that if the disease be incipient, and the patient in good health, the Cancer may be prevented from ever becoming a serious disease at all.

"In one sense I am inclined to believe that the Cancer will ever prove incurable. If it affects the mammary gland, the diseased part will ultimately perish, either by its being removed by ulceration, or by absorption. The facts are too few to assert that this will be constant; but the powers of regeneration possessed by the human system are so feeble, that the supposition is highly probable. Should it prove to be so, this circumstance will be a proper criterion, by which to determine, whether a case treated in an early stage by the method here proposed, has or has not been a genuine case of cancer."

Speaking of the strongest characteristic of cancer he observes:

"This, when the disease has become active, is unceasing, and gradually involves every contiguous part, however dissi-

milar in their nature, and excites them to similar action. The skin above, the muscle, periosteum, and bone beneath, besides the absorbent glands, all become eventually a carcinomatous mass; the intercostal muscles, and probably even the lungs themselves, eventually suffer from the contiguity of a cancerous breast. What then is the preventing the disease from spreading, but direct ocular evidence, that the generation of new Cancer is prevented. It is an inference then of common sense, that whatever is proved by experience to possess this salutary influence, should be adopted as soon, at least, as the nature of the complaint is ascertained.

"But this is the advice of friendly exhortation, not extorted from the disappointment of expectations too sanguine.

"If there be any doubt that the spreading of the disease is truly the generation of new Cancer, an examination of the anatomical structure of the disease must put it beyond question. I will make use of the description of Mr. Home, whose access to the preparations of the Hunterian Museum makes his authority the very best that can be obtained on this question.

"Mr. Home has described anatomically three stages of the disease. For my own purpose I shall transcribe only the first and third." "When a section is made (of a cancerous tumour) in its early stage, it puts on the following appearance:—the centre is more compact, harder to the feel, and has a more uniform texture than the rest of the tumour, and is nearly of the consistence of cartilage. This middle part does not exceed the size of a silver penny; and from this, in every direction, like rays, are seen ligamentous bands, of a white colour, and very narrow, looking, in the section, like so many irregular lines, passing to the circumference of the tumour, which is blended with the substance of the surrounding gland." Dr. Baillie's description, it is well known, of the structure of Cancer in the stomach and uterus accords precise-

ly with this. Again, " when the tumour has advanced to what may be called cancerous suppuration, which, however, does not always happen in the centre, before it has approached the skin, and formed an external sore; it then exhibits an appearance totally different from what has been described. In the centre is a small irregular cavity, filled with a bloody fluid, the edges of which are ulcerated, jagged, and spongy. Beyond these, there is a radiated appearance of ligamentous bands, diverging towards the circumference; but the tumour, near the circumference, is more compact, and is made up of distinct portions, each of which has a centre, surrounded by ligamentous bands, in concentric circles." It appears from this description, that in the advanced stage, the circumference of the tumour is composed of a number of portions, exactly of the same structure as the central part, in the first stage. The circumference therefore consists of a number of Cancers in the state of scirrhus. It must follow, that whatever treatment prevents the spreading of the disease into the contiguous parts, is the true preventive of the formation of Cancer."

" I am aware that it may be objected, that, when the Cancer has become ulcerated, it does not always make the same progress as it did before; but it will sometimes become stationary, or even make some apparent advances to a natural cure. But in these cases, though this may happen in the part first affected, the disease has always been making progress in some other, commonly in some contiguous part. The whole disease is never quiescent: its activity is merely transferred. Thus Hildanus relates a case of Cancer of the tongue, in which a tubercle increased to the size of a chesnut; it ulcerated, and the ulcer contracted and closed, so that the whole eemed almost well, except a little crack. But in the mean time some glands, which had tumefied under the chin, ulcerated internally, the frænum linguæ was destroyed, the lip swelled, and the whole tongue itself so much, as nearly to

fill the cavity of the mouth. Mr. Home has recorded a similar circumstance in a case of Cancer of the penis, where the disease in the gland became as it were quiescent, while the ravages committed in the groin were violent in the extreme. But in all the cases hitherto related, (except the second, where the subject was very old) and in those still to be reported, the quiescent state extended to the whole disease; it included every part alike; it began with the adoption of the regimen, and continued uniformly and steadily, as long as it was continued.

"I have said enough, I think, to shew the utility of this regimen in cases, even where it cannot effect a cure; it limits the disease; it soothes the pain; and it palliates several of the most distressful symptoms. But it is now my business to turn to a scene still more pleasing; and to shew, by the infallible test of experience, that both the cancerous tumour and the cancerous ulcer are really curable. The former may be removed from the system by spontaneous absorption; and the latter may be healed by the separation of the diseased parts, and the surrounding skin being drawn down, and completely closing the basis of the ulcer."

(To be continued.)

VACCINATION.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—ALTHOUGH my name has been introduced by a Gentleman as inimical to the practice of vaccination, I must confess I am still undetermined as to its real merits. That it is not an uniform preventive of Small Pox, I believe is admitted. Therefore I wish to inquire of those better acquainted with the subject than myself, and particularly of Dr. Willan, whether any new cutaneous disease has made its appearance coeval with the introduction of

this discovery, under the term of the *Psora Bovilla?* What is apparently its nature, and its best mode of treatment? I know some strong facts have occurred in Dr. Willan's own practice upon this point. My inquiry is one neither connected with opposition, nor the desire of singularity; but to possess a conviction, from the judgment and experience of others, of what is really the truth respecting this. I can have no doubt of Dr. Willan's professional correctness, and that I shall be favoured with his opinion in answer to the above.

I am, Gentlemen, your obedient Servant,

Henrietta Street, Jan. 20. R. REECE.

VACCINATION.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—It may be expected that the discussion of Mr. Rose's bill in the present session of parliament will excite the activity of the eternal enemies of vaccine inoculation; and I hope that its friends too will be equally on the alert in their endeavours to refute calumny and detect misrepresentation.

If the vaccine disease is occasionally the cause of mischief, it is greatly to be lamented, and so far candour must allow that the injury (be it what it may) ought, in striking a balance, to be deducted from the good it confers on society. But the true question with sober inquirers will be as to both the *absolute* quantity of injury inflicted, and its *relative* quantity compared to that resulting from the old inoculation. When every accident that happens to a child that has undergone vaccine inoculation is ascribed by its adversaries to this source, I think there are two measures which might be taken to set the public mind at rest on so important a subject, and, if possible, to bring the discussion to an end.

The first measure I would propose is, that the deaths from small-pox should be divided in the bills into two heads; the

first to contain those who perish from the natural contagion, and the second, those who are destroyed by inoculation. Thus we should have annually authentic proofs of the direct and immediate injury of the old practice; and might compare it with the alleged mischiefs of vaccination. I believe that the numbers thus destroyed are much greater than is commonly imagined, and that it would confirm the observation in the report of the College, that "The deaths from common inoculation are more numerous than the cases of imputed mischief from vaccination."

A second measure that might be useful would be for the friends of vaccination, those particularly who are connected with the vaccinating societies, to collect histories of diseases which have immediately followed the inoculated small-pox. The work would be directly useful; it would be fighting the anti-vaccinists with their own weapons, except that I should hope they would use no arms but those of truth. And here again I doubt not that for one case of injury sustained from vaccination, a hundred might be found of far deeper and more serious mischief from the small-pox inoculation.

As long as every sinister event, which follows vaccination, is ascribed to it, the minds of parents will continue to be agitated and alarmed. If it be expected, even that what obviously does so much good should be wholly unattended with any concomitant evil or imperfection, we expect more than has hitherto belonged to any human invention whatever,

MEDICUS.

II. SURGERY.

One of the chief improvements of Surgery that claim our attention for this month, is, Mr. Wardrop's new proposal for conducting the incision of the Cornea in cases of Cataract.

CATARACT.

The inconveniencies that attend the usual mode of incision

are first pointed out, shewing that the incision of the internal coats is not equal to those of the external. After enumerating very clearly all the disadvantages of the usual mode, Mr. Wardrop observes, they appear to him to "arise chiefly from the want of a sufficient portion of the cornea being left at the inferior part of the wound, to support the iris, and to prevent the pressure of the parts contained within the eye-ball, and the occasional action of the muscles, pushing forward the iris toward the wound of the cornea: I therefore conceived, that if the incision could be made in such a manner, that a larger portion of the cornea could be left at the inferior part of the wound, and that, if, at the same time, it was made of such a form as to allow the easy extraction of the lens, a considerable improvement would be made in the operation. With this view, I made the incision in the following manner:

"The best knife for the purpose is that of Mr. Beer, the celebrated oculist of Vienna, by whom it is employed for the common operation. The blade is of a simple triangular form, the back being one continued line from the handle. Its point should be made firm, and the blade should turn gradually thicker from the point towards the handle. The back of it should not be left square, but rounded off and smooth. Having previously oiled the knife, to make it cut more keenly, its point is to be thrust through the cornea, a little above its transverse diameter, and one line from its margin, in a direction as if it was to pass through the pupil, or nearly perpendicular to the spherical surface of the cornea. When it reaches the plane of the iris, the blade is to be moved a little upon the incision which is already made, as a fulcrum, so that the point is elevated and turned towards the opposite side of the cornea. It is then to be carried forward and a little obliquely downward, so that the cornea is again punctured at its transverse diameter, at the same distance from the sclerotic coat at which it had been

entered on the opposite side. By these two incisions, the blade has cut perpendicularly, or very nearly so, to the spherical surface of the cornea, and the gradual thickening of the knife, by filling up the wound as fast as it is made, prevents the aqueous humour from escaping. The eye is now completely secured by the knife, and the incision is to be finished by turning round the blade on its axis, thus keeping the edge turned outwards, in such a manner, that the remaining part of the incision is a straight line, and, therefore, nearly perpendicular to the lamellæ of the cornea. If none of the aqueous humour has escaped before this last step of the incision is begun, it is sometimes necessary to withdraw the knife a very little, to allow a drop of it to escape, before the knife can be turned on its axis."

Thus conducted, he farther proceeds:

"The incision should be made so that the inferior edge of the wound is half way between the circumference of the cornea and edge of the pupil, supposing the pupil to be in a moderate state of dilatation. If it be made nearer to the sclerotic coat, then the advantage to be expected from this mode of operating will be lost; and, on the other hand, if it be made at too great a distance from the sclerotic coat, and, consequently, too near the pupil, the iris will be apt to fall forwards, and a portion of it to pass through between the lips of the wound. In one case, in which this accident happened to me, the wound was long of uniting, and, after it was healed, the pupil remained very irregular and contracted.

"In making the incision of the cornea in this manner another circumstance also particularly deserves notice, which is, that on giving the knife the motion round its axis, after having punctured both sides of the cornea, there is a great risk of the iris turning over its cutting edge, some of the aqueous humour having by this time escaped. An operator who meets with this for the first time, is apt to think a wound of the iris inevitable; but if he cautiously stops the progress

of the knife, and presses the iris from its edge, by gliding the point of his fore-finger over the cornea, the incision may be completed with perfect safety.

" I should not omit mentioning, in this place, the great advantage to be derived by having the eye-ball properly fixed before attempting to introduce the knife. I suppose the upper eye-lid firmly secured by the fingers of an assistant, or by Peilier's speculum, and the fore and middle finger of the operator's left hand placed within the eye-lid, in contact with the eye-ball, pressing firmly in the corner of the eye the middle finger, to prevent the ball rolling inward. When first touched with the point of the knife, the eye generally starts; I have, therefore, adopted it as a general rule, to touch the eye gently, or give it little strokes with the back of the knife, as long as it starts or remains unsteady; but the moment it appears fatigued and fixed, I draw the back of the knife with great caution along the surface of the cornea, till the point arrives at the exact place where it is intended to penetrate, and then, with some quickness and firmness, it ought to be pushed into the anterior chamber.

" In fixing the eye, too, great advantage is derived by making the assistant press considerably on the ball, whilst the knife is made to pass through both sides of the cornea; but whenever this part of the operation is completed, all pressure ought to be carefully guarded against, and the upper eye-lid merely supported.

" I have found the incision, such as has now been described, to fulfil completely my expectations, after having performed it in upwards of twenty cases, in order to extract the cataract, and also in other operations, where it was necessary to make an incision into the anterior chamber. I have also observed, in some persons who have been operated on by the most able oculists, that the incision of the cornea was by no means of the regular semicircular form, nor was it so near to the circumference of the cornea as is recommended; notwith-

standing the lens in these cases was readily extracted, and the pupil remained perfectly regular. This most frequently happened in eyes which were operated on with the left hand: I therefore did not consider it as the aim of the operator to make the incision of such a form, but rather as an accident occasioned by the difficulty, which most people find in using their left hand."

EGYPTIAN OPHTHALMIA.

THIS epidemic Ophthalmia, which has created so much mischief in our armies, has given scope to the pens of a number of our military practitioners, and we give them credit for their attempts to elucidate its nature and treatment. But, like every subject in vogue, the Egyptian Ophthalmia has been seen where it never existed, and obstinate cases of the common ophthalmia of this country it is now fashionable to refer to an Egyptian source. The Egyptian Ophthalmia is chiefly distinguished by its enormous quantity of purulent discharge; but though purulency is an attendant of severe cases in this country, it is not to be supposed the same identical disease. These hints we merely throw out to caution practitioners against referring to a new origin what is a common disease of this climate.

ANEURISM.

THE perfection of Surgery is now so great, that the operation for Aneurism has been performed repeatedly in the Hospitals of the metropolis on large arteries; and these cases are the following:

"A fourth operation for aneurism of the carotid artery has recently occurred. It was performed at St. Thomas's Hospital on the 16th instant, upon the person of a strong middle aged man, by Mr. Cline. The tumour, which was large, had been particularly rapid in its growth. The other circumstances of the case were by no means favourable. Respiration and deglutition were affected by the pressure of the tumour, which had pushed the larynx from its straight course. The

patient had besides a very frequent and troublesome cough. The pain was confined to the tumour and corresponding side of the face.

" All these symptoms were relieved for the twelve hours succeeding the operation. They then recommenced in an increased degree, particularly the cough and difficulty of swallowing, accompanied with much irritative fever, to remove which medicine proved inefficient. The man died on Monday the 19th.

" The operation for carotid aneurism, performed by Mr. Astley Cooper in Guy's Hospital, in June last, has been attended, we are happy to say, with perfect success. It is highly valuable, inasmuch as it is hitherto the only case by which, as far as we know, the credit and character of the operation are supported; we mean its character in a medical sense. The practicability of the safe application and removal of the ligature was put beyond doubt, by the event of his first operation for the disease two years ago. Humphries, the subject of the former, resides in Labour-in-vain-court, Old Fish-street. He is perfectly well, and has returned to his employ, which is that of a porter. The facial and temporal arteries of the corresponding side have no susceptible pulsation. On the opposite side, the temporal artery is larger than usual. The tumour has totally disappeared. His intellect is perfect—his nervous system unaffected: and the very severe pain which he endured upon the same side of the head, previous to the operation, he has never experienced since. A hoarseness, which he had prior to the operation, continues, though it is not now so much as it has been.

" The subject of an operation (performed about the same time by the same gentleman) for inguinal aneurism, has likewise perfectly recovered; he walks with considerable ease, with the aid of a stick, and has accomplished a walk of three quarters of a mile at one time. He makes no complaint of coldness in the limb. The event of

this case is the more gratifying, as the man did not see Mr. Cooper until the tumour, which was very large, was actually livid, and the operation could not have been postponed without considerable risque. In proof of this, we may add, that on the sixth day following, the sac burst and discharged its contents."

CALCULUS.

No disease comes oftener under the care of the surgeon than Calculus. Chemistry has tended much of late years to elucidate its nature, and some observations upon it have been made by Mr. Barlow, of Blackburn, which deserve attention.

"The general opinion," he observes, "that what is called hard-water, when taken into the stomach as a common beverage, predisposes persons to the disease of stone or gravel, by a specific mode of action and affinity with the urine, appears to me to have little or no foundation in truth; nor will calculous affections, on a minute inquiry, be more frequently discovered in one county than another.

"Were it possible to institute a ratio of the comparative number of stone patients in the various counties in this kingdom, according to the aggregate of inhabitants in each, it is more than probable that the difference of result would scarcely be noticed: this conclusion, then, leads me to believe that water, even when impregnated with sulphat and carbonat of lime, possesses no inherent power in predisposing persons to this disorder. It is stated by the querist in a publication that the county of Norfolk produces more instances of calculous affections than that of Lancaster, although the water in each is equally impregnated with earthy matter. Whence (says he) the origin of this vulgar error?

"The popular opinion of this complaint being endemic, may, I conceive, arise from the circumstance of some resident surgeon having gained celebrity in this particular branch of chirurgery, which induces those who are afflicted with this malady to apply for relief, when, otherwise, they would, i

all human probability, have died without having the stone extracted, or even the disease discovered, by those less competent to undertake the operation.

" I am not acquainted with the relative frequency of calculous cases which any particular county produces, or the average number of stone patients admitted into the different hospitals in this kingdom, nor the result of success consequent to the operation; nevertheless, some inference may be drawn from the relative number of cases in this part of the county, compared with other districts, when it is known, that during the period of the last seven years I have operated for the stone thirteen times in this town and neighbourhood, on patients from the age of two and a half years to that of fifty, and in every instance (except one) with success.

" In allusion to the popular opinion respecting the tendency that water, when impregnated with earthy matter, has in producing stone in the bladder, I will refer the reader, as a proof of the antiquity of this prevailing prejudice, to sect. 3d, page 68, of Hippocrates de aere locis et aqua, where he says, " The waters of rivers or lakes into which different streams fall, or of other places into which they have at times accumulated themselves, are apt to produce the stone; for, being composed of many different sorts, some sweet, others salt, or aluminous, they must deposit a sandy sediment. Persons whose bowels and bladders are in a soluble state, may escape sabulous collections; but those of a more fiery habit, when the mouth of the bladder is attacked with inflammation, cease to make water freely, and then the gross sandy parts of these waters deposit themselves, whilst the more fluid particles are let out," &c. &c. In another part of the same author's works, he attributes the stone in children to the impure milk of nurses

" I am aware, that the proximate cause of the production of urinary calculi is involved in much obscurity; yet it appears to me, that the disease does not originate so much, as

has been supposed, in the uriniferous vessels of secretion in the kidneys, or in the urine secreted therefrom, as in the mucus produced from the inner surface of the bladder, and sides of those organs and cavities, through which it naturally passes from its source in the kidneys to the termination at the prostate gland.

" The peculiar construction and disposition of the prostate gland to generate calculi, may be one cause why men are more subject to the disease than women, seeing they are destitute of that organ; and we frequently read of calculi being found in this appendage to the bladder, and also of their existing spontaneously in other cavities of the body; such, for instance, are the intestines, uterus, stomach, gall-bladder, lungs, and cavities of the joints in gouty habits.—See Baillie's Morbid Anatomy, Morgagni's Epist. Lieutaud, Boerhaave's Commentaries, and Memoirs of the Royal Academy of Surgery at Paris.

" These depositions of earthy concretions, I conceive, abound more frequently in those reservoirs of the system where there is the greatest quantity of mucus secreted, and where it is pent up in certain parts of the body, than in those cavities from which there is a greater facility for the fluid to escape from the part where it was deposited; hence, may it not be reasonable to infer, that the proximate cause of urinary calculi exists in an over degree of stimuli affecting the urinary organs, and thereby producing an excess of inspissated mucus on the inner surface of the bladder, and a morbid state of those membranous cavities, so essentially necessary for the performance of their healthy functions. These superabundant secretions may become stagnant in the excretory ducts and rugæ of the bladder, and, by chemical affinity with the urine, calculi may probably be generated. On the same principle, any foreign substance accidentally lodged in the bladder, may excite a certain degree of inflammation, and coagulable lymph or mucus be thrown out in the cavity of

this viscus, which, by a specific attraction with the extraneous body, a nucleus may be thereby formed; hence, we frequently see the surface of a stone, recently extracted from the bladder, covered over with mucus, which, I conceive, has in some instances been the cause of the stone not being so distinctly ascertained by the surgeon when sounding the patient, prior to the operation of lithotomy.

" To conclude these remarks, I will hazard an opinion, that as we frequently meet with children who are afflicted with the stone in the bladder during infancy, and who have been exempt from the causes before mentioned, and also with fœtuses, in whose bladders much sabulous matter is deposited in their urinary passages during their stage in the uterus, may they not be sometimes born with the disease?"

ENCYSTED TUMOUR ON THE CHEEK, BY A MEMBER OF THE ROYAL COLLEGE OF SURGEONS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—SHOULD the account of the following case which occurred to my notice, be deemed worthy an insertion in *The Medical and Surgical Spectator*, I request that you will have the goodness to give it a place in your journal.

A woman between 50 and 60 years of age, applied to me to relieve her of an encysted tumour of the cheek, of the steatomatous kind, the skin of which was much inflamed, and become very thin.

On account of the hazard of wounding the parotid duct, I declined either of the two methods of removing this complaint, by dissecting out the cyst, or destroying the same by escharotic applications. The swelling was of the size of a large nonpareil apple, and the state of the integuments assured me, that if the tumour was suffered to burst, although under such circumstances, the bag might have inflamed and

sloughed, yet a very unsightly cicatrice would form, did the patient ever get well.

I resolved to evacuate the tumour by a puncture: its contents were greater in quantity than I could have imagined to have been collected. As soon as the cyst was emptied except as to the integuments, the complexion had the appearance of a baked apple, after its contents are squeezed out.

I determined nevertheless to trust this case to the result of the original opening, and with that view I satisfied myself with merely introducing as much lint into the tumour, as not painfully to distend the sac.

The second day, part of this dressing came away easily: on the fourth, the remainder of the lint dressing separated itself as readily, but the discharge was copious and greatly offensive. It was observable, after this period, that the exuberant state of the integuments was much contracted; I then conceived it possible, that the sides of the cyst might approximate and unite by adhesive inflammation, and thus prevent a renewal of a fresh secretion in the cyst.

The integuments of the tumour, in the space of a month's treatment on this plan, collapsed in such a manner, as led me not to regret the putting into practice the removal of the seemingly superfluous integuments, which it was at first my intention to do, and certainly from the appearance of the very pursy state of the skin, every reader will think with me it might have been necessary.

The introduction of a solution of the argentum nitratum in the proportion of one drachm to one ounce of water, by the means of lint dipped into the same, has certainly prevented a renewal of the steatomatous secretion, but without effecting an obliteration of the cyst. The bag remains open, and although two years have elapsed, no collection of any kind has taken place, nor does any discharge escape from the cavity of the tumour. I shall not enlarge on this

case beyond the circumstance of this occurrence, novel at least to myself, and certainly confessed as such by those who have examined the case. This patieat has also been seen by a friend of the highest surgical and anatomical attainments; and though, as I confess the determination of this case was perfectly accidental on my part, yet by that gentleman it was considered as one ending so very happily for the patient, that he deemed it a circumstance worthy of professional notice.

I could have wished to have made the recovery of this patient complete, by removing the edges of the opening, and thereby procuring by the first intention the complete healing of the wound.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—In your last number, I observed a letter from a correspondent, dated Cambridge, containing remarks on the nature and treatment of Tinea Capitis; I conceive it therefore but justice to myself to observe that the same practice detailed in that letter is an outline of what has been regularly my plan of treatment for the last three years, and as surgeon to a Public Institution, I have had the fullest opportunities of trying its success. I long since communicated my ideas to Dr. Haighton, my worthy colleague, as well as to my friend Mr. Astley Cooper, both of whom have had opportunities of appreciating its merits, and to both of whom I intimated my intention to publish a short detail of those cases, in which this plan has proved successful. I have endeavoured as much as possible to disseminate my ideas on the subject to every practitioner whom I have ever had occasion to meet on this disease, which occasions have not been unfrequent, and I am therefore glad to find, that the same practice has been adopted by others as well as myself.

I am, Gentlemen, your obedient servant,

St. Mary Axe, Jan. 13, 1809. THOS. LUXMOORE.

REMARKS ON SPHACELUS OF THE TOES AND FEET, BY A MEMBER OF THE ROYAL COLLEGE OF SURGEONS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—Had all writers given, like Wiseman, a detail of their unsuccessful practice, our professional knowledge would by this time have largely accumulated.

I am not without hope that the following communication of my successless treatment in cases of Sphacelus of the Toes and Feet, denominated by some surgeons as Mr. Pott, mortification of these parts, will not be without its use. No writer has since added to the stock of information on this subject with which Mr. Pott favoured the public. The object of his publication was to recommend in a curative point of view the internal use of opium; a remedy which, in the several cases in which I have tried it, seems entirely undeserving any eulogium.

It would be proper to premise that it has frequently fallen to my lot to treat mortifications arising from cold, inflammation or accident; but in none of these cases did the quantity of opium required to allay irritation justify me in considering it as possessing any thing like a claim to the character of being a specific remedy, as intimated by that writer. In those cases of mortification analogous to the instances described by Mr. Pott, I have not succeeded in arresting the progress of sphacelus, and in some cases failed of procuring ease. From the encomiums given to this drug by Mr. Pott, had I not attentively perused the account this author has communicated to the profession, I should have been led to conclude that we had been treating different varieties of mortification.

I have directed this medicine to be given in gradually increased doses; but it had no influence over the complaint, for my patients died.

This event, however discouraging, determined me, upon the first case of painful affection of the toes, to try the efficacy of

the remedy previous to the existence of mortification, having, upon inquiry of every patient, found that they had for days, in some instances weeks, experienced excruciating torture in their feet before the part manifested any change of colour or appearance of disease.

An opportunity soon presented itself to my notice in the person of Mary Evans, a robust woman of the age of forty. She applied to me on account of extreme pain which she felt in her toes, which she described as of a shooting and fiery nature, depriving her of rest. I informed her that her feet did not seem in their appearance, or on handling them, in the least disordered, but that I would direct a medicine for her which I hoped would relieve her. I ordered her twelve pills of the extract of opium, containing each a grain and a half, of which she was to take one every hour until ease was procured. After the eighth hour by this mode of treatment she became perfectly easy. To ascertain the credit due to the remedy, I caused more than once pills to be sent of the same number and complexion, but containing only half the quantity of opium. She did not seem aware of any imposition having been practised upon her, but asked if her pills were the same, as her pains had returned, though in a weaker degree: upon which communication I ordered 12 grains of the narcotic to be daily taken for the space of a month, when the proportion of the opium was afterwards gradually reduced. She is now in good health, but always describes her sufferings at the time to have been dreadfully severe until she took the pills.

It is some years since the occurrence of this case; but I have succeeded also in two other cases by this practice in alleviating and removing this very painful affection of the feet. I most perfectly accord with Mr. Pott in the propriety of adopting the mildest external applications: the linseed poultice was the external means I used in those cases in which mortification had made its appearance previous to my being consulted. It may be right to observe, that the patients always complained, if the cataplasm was more than lukewarm, of

their sufferings being increased by it. The intelligent reader will determine for himself what degree of reputation opium merits as a probable preventive to the occurrence of sphacelus, if resorted to before there is any manifestation of disorder in the feet.

It having been suggested by a friend to give an account of some of the cases of mortification of the feet, in which opium was taken internally without any advantage, I beg to think differently from this gentleman, believing that the sheets of *The Medical and Surgical Spectator* might be more usefully occupied. Suffice it to say that my practice in these cases has always been open to the observations of other practitioners.

ON THE FUNCTIONS OF THE LIVER.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—MAY I beg you to accept my proper acknowledgment for your ready compliance in inserting my former paper on the Spleen, and to request you will do me the favour to give this a place in your next.

Your most humble Servant, S.

Gentlemen—HAVING in the first volume of *The Medical and Surgical Spectator* offered some observations on the nature and uses of the Spleen, and besides its ordinary and important function of insuring a constant and regular supply of blood to the stomach, I suggested the idea that it may on particular occasions sustain a vicarious office. Pursuing that idea, I consider it a depot of pure prepared nutritive blood stored by the animal œconomy when in health, for the purpose of supplying the system when diseased; I consider it in this light from the short circuit the blood takes from the heart to the spleen, from thence through the vena portarum to the vena cava; after its oxygenation from the pulmonary arteries, the blood is soon distributed to the stomach and spleen, whence, after performing its office in the ordinary

course of digestion, a deposit of pure blood is laid up in the cellular substance of the spleen: that its bulk is capable of enlargement and diminution is acknowledged by most anatomists. "Monsieur Lieutand in Hist. de Acad. des Scienc. Paris, Ann. 1733, argued for the spleen being larger by a greater quantity of blood in it when the stomach is empty, and that the blood is pressed out when the stomach is full to increase the secretion of bile." Cyclopæd. But that the liver is fully competent for the secretion of bile without the help of the spleen I think will be generally allowed. That it is a magazine from which the system is occasionally supplied, I was strengthened in my opinion from two of the experiments of the ingenious Mr. Home upon asses that had been kept four days without water and two days without solid food. Upon killing those animals, the spleen in each was found diminished to half the ordinary size, being a pretty strong proof that the animals, during their fasting, were partly sustained by nutriment from their own depots. As there is an accumulation of adeps in its proper cells when the animal is in good health, and plentifully supplied with nutritious food, which is capable of being again taken up into the circulation by means of the absorbent or lymphatic system, so in like manner I imagine the spleen to be an extra store of pure blood ready to supply the sanguiferous system when needful. Considering it in this light, how useful must such a viscus be in the animal œconomy: how often do we find the stomach in such a state as to reject food for many days together, under which the animal's strength would sink very fast, if it was not for this wise provision of nature within itself. Hence I conclude, that, besides its constant duty of assisting the stomach in promoting digestion, the spleen, from its proximity to the heart, its nervous and vascular texture, contains a kind of extract of the finer particles of the blood, perhaps chiefly red globules, highly animalised, and abounding with living principle, from which a little being distributed in the round

of circulation, the animal may be sustained for many days, when the usual supplies of nourishment are cut off.

Yours very respectfully,

Jan. 12, 1809. SCRUTATOR.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—I HAVE conned very attentively over the communication from Dr. Reece, in your publication of this month, containing the case of Admiral Henry; and whether it be owing to my impenetrable dulness, or to Dr. Reece's style partaking too much of that which Burke would call a portion of the *sublime*, I cannot tell, but so it is, I do not perfectly understand him. I allude to the following passage in his letter: "The Admiral having *cured* himself of many obstinate attacks of Rheumatism and Gout by severe friction, and *pounding* the part affected with a *wooden hammer*; resolved to make the experiment on the right *eye*; and after persevering with great fortitude for *about a month*, he found that he could discern a luminous body, and continuing the practice, the diseased lens was gradually diminished, and the gallant Admiral is enabled to read small print." Now I wish to be informed how the experiment of severe friction and pounding (for the word experiment refers to both) was performed on the eye of the gallant Admiral?

We are told again, that by the experiment of rubbing and pounding the eye, the diseased lens was diminished. There appears to me some ambiguity in this sentence: from the manner in which it is expressed, we must suppose that the lens itself was diminished; and yet I cannot help thinking the doctor intended to have said, the *disease* of the lens was diminished. A ray of his information in your next number will pierce the darkness which surrounds me, and my mind shall be no more

——— like a clouded lens,
But clear and bright as other men's.

London, January 23, 1809. T B.

Practical Observations on the Diseases of the Joints, commonly called White-swelling; with Remarks on Caries, Necrosis, and scrofulous Abscess, in which a new and successful method of treating these complaints is pointed out. By Bryan Crowther, Member of the Royal College of Surgeons in London, and Surgeon to Bridewell and Bethlem Hospitals.

(Continued from Vol. I. page 64.)

SOCIETY is certainly under the greatest obligations to those practitioners, who, by their assiduity to the duties of their profession, extend our knowledge of practical science, for one practical observation is worth ten thousand theories: theory may please, but fact elucidates: the one has the absurdity to flatter itself, that by its specious garb proselytes will flock to it, while fact establishes itself by the sober simplicity of its manner, and solidity of its argument. Such was the state of information respecting caries, when Mr. Crowther opened a new field on this interesting point, and called the attention of the medical profession to some new facts, connected with a subject hitherto involved in great obscurity. As a writer, we consider Mr. Crowther as neither wishing or anxious for literary fame; he has soared still higher, by his attempts to be useful to the public. This writer is most particularly deserving of credit to his assertions, because his writings contain simply a narration of facts, unconnected with any theoretical opinions. With respect to the diseased state of bones consequent on white-swelling, he has stated an opinion of Mr. Lawrence, Anatomical Demonstrator of St. Bartholomew's Hospital; that the bones in this complaint undergo no enlargement. Mr. Crowther has, with that liberality that should ever attach itself to a professional character, given to this anatomical surgeon the credit of having first communicated this important information; important it is, for Mr. Crowther has observed, the seemingly

enlargement of the ends of the bones of the joint has induced many surgeons to recommend and adopt the removal of the limb. We learn from this author, that the mere distended state of the joint will put on such appearances as to induce the most experienced surgeon to imagine the bones to be actually expanded; but after a local antiphlogistic treatment, derivation of purulent discharge from the integuments covering a diseased joint, this seemingly encreased size of the ends of the bones disappeared."

This supposed enlargement has, by Cheston, Kortum, and other practitioners, been confounded with rickets, an instance of which we give in Mr. Crowther's own words:

"Kortum, on scrofulous affections, speaks of the bones being expanded; but, it is very extraordinary that he should describe the complaint as proceeding from a scrofulous or rickety source, as I have never seen a case of scrofulous caries arise from a rickety disposition. A mistaken opinion was several years ago given on this subject by a surgeon of eminence: when a little boy was brought to him, with a disease of the knee, he told the friends it was only the rickets, which cold bathing, country air, and time, would remove. In this boy's complaint the knee was enlarged; there was no fluctuation in the joint, and little uneasiness on moving it; and it was one of those cases in which the condyles of the femur appeared to be increased in their dimensions. I gave my opinion accordingly, and the relations were satisfied that my notions respecting the child were correct, and that it was in fact a white-swelling, and not the rickets. In consequence of this opinion I have since been induced to examine particularly many children who have been brought to me, on account of scrofulous affection, and I have always remarked that they were totally free from any trace of rickets.

"In rickety children we do not find one joint only affected, for the corresponding limb shews marks of the same disease.

—Mr. Cheston says, ‘ It has indeed been commonly ad-
‘ vanced, that the bones are almost always enlarged; this I
‘ never observed, unless in young subjects, where it might
‘ have been complicated with the rickets, though I have
‘ examined a great number of them when injured by this
‘ complaint. I am inclined to think that this notion either
‘ arose from the deceitful feel through the diseased in-
‘ teguments, &c. or its being confounded with spina ven-
‘ tosa.’ I have seen but very few joints dissected after amputation, but in those affected with spina ventosa, or scrofulous caries, which I have had an opportunity of inspecting, the bones had not undergone any increase in size, although they were softened in their texture, and excavated from within outwards. In those cases where the bones are injured in consequence of disease occurring first within the cavity of a joint, although they are frequently deprived of their cartilaginous covering, and sometimes even suffer loss of substance, yet the structure of the bone is not changed, as happens in the scrofulous caries.”

Mr. Crowther speaks of bones being affected in two ways:

“ The bones, in this complaint, are affected in two ways: in the one, they are affected primarily from disease originating in their interior structure; in the other, secondarily, by their articulating surfaces becoming diseased, in consequence of a previous affection of the internal surface of the joint.

“ In the carious state of a bone, it has been said, that to expedite a cure, exfoliation should be promoted; but experience tells us, that exfoliation rarely occurs, and when the complaint does not seem to require it, may we not infer that it should never be encouraged? It is very probable, that if means had not formerly been employed to promote exfoliation, it would have been found an unusual occurrence. The supposed necessity of exfoliation in scrofulous joints formerly gave rise to an unnecessary, painful, und mischiev-

ous practice, such as the making use of the knife, caustics and cauteries: the last of these remedies were to dry up, what was termed the rottenness of the bones, and to destroy the hypersarchosis, or the exuberant fungus, with which the surgeons of those days were frequently troubled."

From our knowledge we believe his statements to be very just. He believes when bones are originally affected, they become the spina ventosa of the ancients, or a scrofulous caries of the modern surgeon.

We are of opinion with this author, that in whatever manner the bones are diseased, the treatment must be the same, and confined to the exterior covering of the articulation. We cannot notice, in a publication like ours, every nice distinction which Mr. Crowther has observed in his practical book, and therefore shall content ourselves in noting some important occurrences marked by him in his practice. Speaking of fungi he thus expresses himself:

"These fungi, by a probe, will be found to lead to diseased bone, and in some instances into the cavity of the joint. The interspace between these excrescences, from the inflated appearance of the integuments, might incline the practitioner to believe, that he felt fluid fluctuating underneath. This sensation is delusive; but I would recommend, particularly in this state of the complaint, to avoid the use of the knife, as diseased parts will ill bear the attack of inflammation; and, I have observed, that they suffer less by openings, which the disease spontaneously makes."

Mr. Crowther, and, we believe, most experienced practitioners condemn the use of the knife, for if the mass of abscesses formed were not likely to insinuate itself into the surrounding part, they had better be left to burst of themselves, but under all circumstances the smallest opening should only be employed to evacuate the contents of such collections.

Of delusive feel of the parts covering diseased bones, we give the following quotation from the book under consideration:

" In cases of diseased bones, the parts, which cover them appear affected, and they afford to the examiner the feel of fluid very perceptibly to the touch. I shall give such part of a case as is interesting, and applies to this part of our subject.

" A man applied to me, on account of a tumour, occupying the whole extent of the frontal bone; it was thought it contained a considerable quantity of fluid, and if an aperture were made, the swelling would subside; but, upon the part being punctured, no evacuation took place, and the tumour preserved its elasticity. By the introduction of the probe, I discovered that the bone was rough in some parts and denuded in its whole extent. I brought the lips of the orifice together, which healed by the first dressing, and sent him to the hospital. The surgeons were positive that the swelling did contain fluid, an opening was made into it, but not any thing fluid escaped. This case is mentioned, as a caution to practitioners, to be guarded in their prognostic, when they make openings into such tumours.

" As we are on the subject of diseased bones, it may not be improper to mention, that I have, in cases of abscess, formed in the course of the tibia, let out the matter, at a distance from the bone, by pressing the tumour on one side, and then puncturing it; on the introduction of the probe, in such instances, the bone has been found rough and denuded. Simple dressings were applied, and over them a compress of linen pressed out of the saturnine lotion, and the cure was effected without exfoliation.

" In a case of a venereal node, which a gentleman had on the shin-bone, this treatment happily succeeded, with a proper mercurial course; and this patient also recovered without exfoliation.

" If absorption of the fluid or matter does not take place, the tumour had better be punctured, to preserve the skin and prevent the occurrence of sloughing.

" In a compound oblique fracture of the tibia, the lower portion was drawn under the upper, the pointed extremity of which projected; a fungus arose, which covered the bone and the space of an inch surrounding it: I introduced a layer of lint between it and the integuments, and then covered the surface with the same: the extremity of the bone was absorbed, and the patient was cured without exfoliation; the fungus shrunk up, and the sore healed by bandage and simple dressing. I regretted at first not having removed the end of the bone at the time of the accident; but from the pleasing termination of this case, I am happy in having acted otherwise.

" I lately amputated above the knee, under circumstances little desirable; the patient's health was hardly such as to justify the operation; it was performed at his own request; and the best amends for the anxiety I suffered on his account are that he recovered.

" On my first dressing, although the muscles and integuments were amply saved, I observed the parts to be flabby, yet still in contact: they yielded abundant serous discharge, the soft parts investing the bone, I anticipated would not keep their situation; I therefore confined them by more slips of adhesive plaister, and directed bark and wine with a more nourishing diet.

" The patient was afterwards seized with hysteria, which prevented him from taking sufficient food: the integuments and muscles retracted, and the bone protruded about an inch and a half. The success of the former case taught me not to be too busy with the exuberant granulation, which afterwards covered the bone; but the circumstance of having saved the integuments sufficiently, and knowing I could recover them by proper attention, and the use of adhesive plaister, afforded me a little comfort. The end of the bone was absorbed, at least it never exfoliated, and the patient recovered with a well-formed stump. I am persuaded, that,

if the fungus had been destroyed in either case, exfoliation must have unavoidably taken place.

" I was many years ago present at an amputation above the knee, in a case of white-swelling, in which the knife, in making the second circular incision through the muscles, had nearly divided the bone, so exceedingly soft was its texture. This circumstance induced the surgeon to detach the muscles farther up, and saw the bone higher: the same occurrence happened; the knife was again let into the bone, and the removal of the limb was finished by the saw. No exfoliation took place, and the operator obtained the credit of having made a most excellent stump."

We also with pleasure remark some observations on caries novel in themselves, and which at a future period may be considered of the highest practical utility.

We promise to continue our review of Mr. Crowther's work in our ensuing publications until the whole be finished.

III. MIDWIFERY.

MIDWIFERY forms a compound of the other departments of the profession. In the diseases of pregnancy and child-bed it claims the attention of the physician. This was pointed out in our last number under the head of Puerperal Convulsions. In the present we shew its connection with Surgery, by stating the cure of one of the most formidable local diseases that occurs to the accoucheur in his practice. This is *Inversion of the Uterus.*

INVERSION OF THE UTERUS.

A striking case of which is thus related by Mr. Merriman:

" Several years ago," he observes, " my friend Dr. Seares and myself had an opportunity of rendering the most essential service to a poor woman, in whom an inversion of the uterus had occurred: with your permission, I will lay

the particulars of it before your readers, as an additional proof that the mischief which must necessarily result from an inversion of the uterus may, by prompt assistance, be prevented.

" In January, 1802, Mrs. Edwards, residing in Brick Street, Piccadilly, was delivered of her first child by Mrs. ———, a midwife of considerable practice and experience. The labour was natural, and of no considerable duration. Some little time after the child was born, Mrs. ——— endeavoured by tightening the navel string to exact the placenta, when (though she asserts that no force was used which could possibly occasion such an event) a very violent pain came on, and the uterus was completely inverted, the placenta remaining attached to it ; on this Mr. Seares was called in, who, finding things in this state, desired that I might likewise be sent for.

" When I arrived, which was not many minutes after the accident happened, the uterus with the adhering placenta was lying without the *os externum ;* blood was flowing profusely, especially from those parts where the placenta was detached ; and the woman was in such an exhausted state, that we doubted if she could survive till the uterus should be replaced. We perfectly coincided in opinion respecting the plan to be pursued ; and as no time was to be lost, Mr. Seares removed the partially separated placenta, and returned the uterus within the vagina, whilst I was laying bare my arm. I then introduced my hand, carrying the fundus uteri before me, till I had passed my arm quite to the elbow within the vagina ; at this moment, I found the fundus uteri, as it were, spring from my hand, and the os uteri began to contract ; I therefore cautiously withdrew my hand, and presently found that the hæmorrhage ceased.

" Mrs. Edwards, during the whole operation, was in a state of syncope ; but on our giving her some wine and other cordials, she revived, and afterwards recovered perfectly

without a single bad symptom. She has since borne several children, and has never found any inconvenience whatever from this alarming and dangerous accident.

" The only merit which can be claimed in this case, was for doing immediately that which was necessary to be done. Had we allowed a very little time longer to elapse before proceeding to reduce the inversion, the patient would probably have sunk beyond recovery, from the profuse hæmorrhage; or, had the hæmorrhage been stopped by the contraction of the uterus, that very contraction would have prevented us from making any impression on the fundus, and the os uteri would have been closely shut against every attempt which we could make to relax it.

" The cases which have come to our knowledge, of women surviving this accident, present a most distressing account of mental and bodily sufferings; these sufferings can be prevented by one method, and by one method only; an immediate and absolute determination to re-invert the uterus. A momentary panic in the mind of the operator may occasion too great a loss of time to allow of his success; for unavailing have proved all endeavours at restoring the parts to their original site, when once the contraction of the uterus has completely taken place."

What is peculiar in this accident is that it often occurs after the easiest labours, and where the placenta has come off in the most complete manner, and without any effort on the part of the operator. This should lead a practitioner to be cautious of blaming those that have had the direction of the labour. Where the powers of the fundus uteri are strong, and it is possessed of much irritability, while the neck and orifice are in a highly atonic and relaxed state, even the movements of the female herself occasioning a contraction of the fundus, and the latter, finding no resistance from the neck and orifice, may cause it to be forcibly protruded in an almost spontaneous manner. This has happened in a

variety of cases, and which Mr. Merriman might have taken notice of as a circumstance which should be always in the recollection of young practitioners.

SPINA BIFIDA.

This is a disease of mal-conformation occupying generally the lower part of the spine. It appears at birth, is always fatal, though the life of the child may be protracted for a twelvemonth, or even more, under cautious management; for the moment the fluid contents of this tumour are evacuated, the child dies. A very remarkable instance of this tumour, from its size, is mentioned by Mr. Cooper in his Surgery: the child lived with it one year and a half, and its size equalled its head; the following case came lately under the inspection of Mr. Washbourn of Marlborough, which he thus details:

"The disease termed Spina Bifida," he remarks, "may be considered as the effect, and that the Hydrops Medullæ Spinalis appears, ab origine, to be the primary and proximate cause of this morbid affection.

"About three months since I was requested by Mrs. Dixon, of this town, to give my attendance and opinion, relative to a swelling occupying the lumbar region of her female infant, who was then three days old, a very fine and healthy looking child.

"The case on inspection was most obviously and decidedly a deficiency or want of two of the inferior spinous processes of the lumbar vertebra. Through the aperture projected a long sac or tumour, containing a diaphanous fluid, and which appeared to be an elongation of the dura mater. On making a gentle pressure with the hand upon the tumour, there was evidently a free communication between it and the ventricles of the brain, constituting the disease called Hydrocephalus Internus.

"The head was large, and the fontenelles and different sutures of the cranium were preternaturally divided. The child from its birth had strabismus; and it did not appear

to have suffered very much from the disease, and had the use of the lower extremities until about a month previous to its dissolution, which happened on the 1st instant (Dec.) at the age of about 13 or 14 weeks.

"Although there was a perpetual exudation of a perfectly colourless fluid from the tumour, it gradually increased in magnitude till within a few days of its death, when small incipient ulcerations took place upon different parts of the tumour, accompanied with inflammation. The case being a hopeless one, I advised the use of soft emollient cataplasms, which appeared to be the best and easiest kind of application.

"DIMENSIONS OF THE TUMOUR.

"A line drawn across from its basis in a horizontal direction from the superior part of the sac measured nearly 4 inches, the longitudinal direction measured $3\frac{1}{2}$ inches.

"Before the child was buried I examined the part, and found the integuments were become corrugated and flat, and the contents quite evacuated."

CASE OF THREE CHILDREN AT A BIRTH, BY MR. FRANCIS KIERNAN, MEMBER OF THE ROYAL COLLEGE OF SURGEONS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—A PLURALITY of children in the human subject seldom exceeds twins. The instances beyond this are few, and where they do occur, deserve to be recorded.

About a month ago I was called to the wife of Mr. Bagster, of Sommers Town. She was, according to her own calculation, in her eighth month; and when I visited her, her labour had actually commenced. She was soon delivered of one child, which, from its size, and the apparent state of the uterine expansion, I was sensible could not be the only one it contained, and accordingly I found, on examination, another, the membranes of which were unbroken, and continued so for ten minutes. As I was in no anxiety to hurry the labour, when the rupture took place, the child was delivered by a footling presentation. I then considered my

business as complete; and on attempting to extract the placenta, I found the head of a third child advancing, which came off with the same ease as the other two. Two of the children were born alive. The whole labour did not exceed two hours. The placentæ came off of themselves without any interference or any pain. Two of them were united; the other was single. The patient said there was no discharge of waters with the first child; and when I examined, I found the membranes ruptured. She is only about twenty years of age. It was a first case, and she promises as a mother even beyond what the wishes of the husband may find convenient.

I am, Gentlemen,

Your obedient Servant,

F. KIERNAN.

Lower Charlotte Street, Bedford Square,
January 18, 1809.

REMARKS.

PLURALITY is a rare circumstance in the larger and more perfect animals. It occurs, perhaps, oftener in the human race than in others, for twins are by no means uncommon. Three, as in the above instance, are not often met with, and four still seldomer. A case of four is related by Dr. Nisbet, which he attended at Edinburgh. The woman was only in the seventh month: three of the children were born alive. The mother was in her 45th year, and had never had a child before. This case is also authenticated by the late Dr. Hamilton, Professor of Midwifery. Five at a birth has been met with on good authority, within these few years, in the metropolis; but all beyond this is to be considered fabulous. No plurality beyond twins can be expected to go to full time, for even twins are remarked to come ten days or a fortnight before the completion of the ninth month.

IV. PHARMACY.

In this department of the profession, scepticism is more necessary than any other. Mistatement and false colouring are natural to the soil; and, after a labour of so many ages, one specific only has been found in mercury to reward the toil of investigation and inquiry.

CANTHARIDES.

This powerful medicine is still, in the hands of Mr. Roberton, a never-failing remedy in those diseases of the female organs connected with spasm, debility, and deranged action of their functions. Those diseases, under the name of habitual Menorrhagia Chlorosis, whether from suppression or retention, leucorrhæa and dysmenorrhæa, he considers little in appearance different from each other, to arise from the same cause.

In stating his opinion and practice in these cases, Mr. Roberton offers his objections to the theory of menstruation advanced by Dr. Cullen, and to the mode of practice founded on that principle. Antispasmodics, particularly opiates, he considers as giving only a temporary relief.

"The same diseased state of the parts," he observes, "still continue, and the only service derived from these substances is, perhaps, relief for the time; but when the next menstrual period arrives, all the former symptoms, perhaps in an aggravated degree, recur, and the harassed and enfeebled patient at length sinks under her accumulated sufferings by the supervention of dropsy in one or other form, probably by consumption of the lungs. Practising with the remedies, recommended by Cullen, or indeed with any remedies, (if they be suited to his general mode of reasoning in these complaints,) will, I venture to assert, be in every case unsuccessful, except in very recent cases where the general health and strength have been unimpaired, when the disease has in a great degree deranged the general health, Cullen seems to think it incurable. The only remedies he then recommends are, external and internal astringents, cold

bathing, and chalybeates, of which, with similar applications, I have repeatedly given, and that to the greatest extent, without, in such cases, deriving any permanent advantage from them.

" The cases which I have lately seen of what female patients call lumbago, are too numerous to be particularised; many of them entirely depending on a diseased action of the generative organs, and capable only of being relieved by the removal of such disease. Although I was aware that pains, in many respects similar in their nature to those of lumbago, are very common in far advanced and very bad cases of leucorrhœa; yet, till lately, I never have met with cases of leucorrhœa, where the discharge had always been of small quantity; indeed, in some cases, scarcely perceptible; and in these, the most acute pains of the loins accompanied it. Such a state of disease has not only been considered as lumbago, chronic rheumatism, gout, &c. but treated as such, and the unfortunate patient has been obliged to undergo, in vain, every variety of treatment recommended by authors for the removal of such complaints; when, as might have been expected, want of success attended their labour, even the horrible supposition of lumbar abscess being the cause of the pain, has been entertained, and bleeding, blistering, with the use of setons, have been obstinately persisted in for its removal. What might not seem very extraordinary, however, the patient remained uncured; but when such means were applied as were suitable for the removal of the complaint, the rheumatism or lumbar abscess, or whatever term they chose to give it, entirely disappeared.

" Thus, by considering these complaints as totally different, and recommending entirely a different mode of treatnent for each, the practitioner not only fails in that success which is wished for, but renders their natural simplicity extremely perplexing.

" If one or more of these complaints be brought on by long continued, though slight, leucorrhœa, our attention

being principally paid to this last, and a complete removal of it effected, almost all the former affections are completely removed.

" The treatment of these complaints has been various, regulated rather by accident, or the whim of the moment, than by the success attending it, or by any fair mode of reasoning, when such has at all been attempted by the physician. In consequence of this complete want of success, these complaints have long been tacitly considered as incurable, unless some favourable change accidentally took place in the constitution of the patient, which was all that either the physician or patient looked to for relief. Physicians, therefore, considering these diseases as incurable, instead of devoting their time to discover some successful mode of treatment, employ themselves in amusing their patients, by assuring them that the various natural changes which, at certain periods of their lives, must take place in the system, will *probably* effect a removal of their complaints. Thus, in anxious expectation of such changes taking place, the patient's vigour of constitution is gradually yet surely wasted; and too often, without the arrival of the long and anxiously wished for relief, other diseases, consequences of the first, attack them, which, for the most part, only terminate with their miserable existence.

" It is by the reasoning adopted by authors respecting the nature, &c. of complaints, that the treatment in them must flow; and in proportion as this is right or otherwise, our cures, except by some accidental occurence, must be few or numerous.

" Although during the early stages of menorrhagia, if it occur, which it often does, in stout plethoric persons, when the pulse is unabated in strength, when no apparent debility has been induced; in short, when all the other functions of the body seem unimpaired, and even when blood-letting is indicated by the apparent fulness and in-

flammatory action of the system, the greatest caution, even at this period, ought to be observed in adopting general blood-letting for its removal. Even the exhibition of medicines that may ultimately induce debility, ought to be resorted to with nearly equal caution. For even although these means may, in almost every case, remove the morbid discharge, I have often observed, that, after such treatment, it was long before the patient recovered her usual strength, and she remained often for years subject to returns of the menorrhagia from the very slightest causes. But when such practice has been adopted in weakly and debilitated habits, (for it is too often indiscriminately applied,) the system is not only left in a dreadfully debilitated state, liable to almost continual flooding, but the most obstinate and troublesome cases of leucorrhœa that I have ever met with, have been brought on after the application of such means. The remedies then which Cullen recommends are either hurtful, inactive, or of a trifling nature, and, upon the whole, by no means suited to the removal of such complaints. He forbids the use of all medicines that may irritate the parts. I think, however, that what I have to state will completely prove that such remedies only as Cullen thinks would irritate the uterus, are calculated permanently to remove such diseases; and that the chalybeates, &c. if deemed necessary along with such medicines, may be useful, but never can, except in the very slightest cases, effect a cure.

" If, during these complaints, which does not often happen, the pulse indicates inflammatory action, and the patient happens to be of a full plethoric habit, should cantharides be prescribed, I grant that it would require no difficult calculation to foretel what would be the result. Benefit must be evidently sought for from very different treatment.

" In all these complaints, however, I believe the only me-

dicines that can be employed with decided advanatge, are those of a stimulating nature. Food and drink, as well as medicines, ought all to be considered in this way. In these affections, the uterine vessels are in a great state of disease; but it appears to me that the general habit of body has been and is equally deranged. The medicines therefore to be employed are such as will sufficiently affect the whole system, and the generative organs as a part of the whole.

"It is of importance to observe, that a great proportion of women have been taught to believe that leucorrhœa is a natural discharge, the existence of which is, for the most part, absolutely necessary to the preservation of their health; and even if their health be already considerably impaired by it, the old and experienced matrons console themselves and others in the supposition, that to this discharge alone they owe the little health they possess. It is not therefore to be wondered at that women often so strenuously deny being affected by it."

MINERAL POISONS.

The effect of mineral poisons on the stomach is a question of high importance in medical practice, as, in the tracing of these accurately, and ascertaining the morbid appearances they produce, the opinion of a practitioner falls to be formed in delivering questions of life and death. A case of this kind was tried at Lancaster Assizes, as stated in a former number. A difference of opinion arose on that occasion, which has induced Dr. Bostock, a party in the business, to institute a set of experiments to support the evidence he then delivered. From these experiments, he contends, that "an animal may be suddenly killed by receiving a metallic poison into the stomach, and yet that the nicest tests may not be able to detect any portion of the poison, after death, in the contents of the stomach.

"This conclusion appears incontrovertible; and though

some analogous facts had occasionally been noticed, it is so different from the generally received opinion upon the subject, that I think it must have considerable influence on all future judicial proceedings, in which the question of poisoning is agitated."

But though no particle of the poison may be discovered by the tests, it is clear, without the diseased appearance of the part or organ that receives it corresponds with the usual phenomena known to occur where it can be detected, these inferences are certainly to be considered as delusive, and no foundation is to be built upon them in spite of Dr. Bostock's assertion, as leading to the most dangerous consequences to the peace and happiness of society, and putting into the hands of medical men an authority and a confidence which they ought not to be entitled to. In the case of Miss Burns, the appearances, on opening the stomach, were not what usually attend the operation of arsenic, the poison alleged to have been given. The appearances from arsenic, Dr. Baillie describes to be " that the stomach is affected with a most intense degree of inflammation; its substance becomes thicker, and there is a very great degree of redness in the inner membrane, arising partly from the great number of minute vessels, and partly from extravasated blood. Portions of the inner membrane are sometimes destroyed from the violent action that has taken place in consequence of the immediate application of the poison. I have also seen a thin layer of coagulated lymph thrown out upon a portion of the inner surface of the stomach. Most commonly too, some part of the arsenic is to be seen in the form of a white powder lying upon different portions of the inner membrane."

" According to this statement, it is obvious that a very considerable part of the injury which had been sustained by the stomach of Miss Burns, was not what is commonly produced by the application of mineral poisons.

" On raising up the stomach, an opening through its coats was found in the anterior and inferior part of its great curvature. The natural structure of the coats of the stomach, for a considerable space around the opening, was destroyed, and they were so soft, pulpy, and tender, that they tore with the slightest touch. *Around this part of the coats of the stomach there were no traces of inflammation.*

" Now, if the hole and the surrounding alteration of structure were effects of arsenic, we do not see how they could be produced in the way contended for by the authors of this pamphlet.

" A mineral poison could act only by exciting inflammation; and the question is, how could inflammation produce the appearances described? The hole could arise only from one of four causes; from ulceration, from mortification, from putrefaction, or from solution by the gastric juice. As these authors contended that it was the effect neither of ulceration nor putrefaction, nor solution, they have only one cause left to which to refer it, and that is mortification; yet the appearances described are not similar to a part which had sustained that process. The coats were " thin, pulpy, soft, and semi-transparent;" these are not the characters of a mortified part, and there was no trace of inflammation, (the only possible cause of mortification,) except in a remote part of the stomach.

" But supposing that the appearance of Miss Burns's stomach was completely similar to that which commonly arises from the action of a mineral poison, it would have been only the appearance produced by very intense inflammation; and how did the writers ascertain the cause of this inflammation? No poison was to be detected, either by the eye or by the best tests, aided by the experimental dexterity of Dr. Bostock. To refer this inflammation to poison, in the total absence of all medical, or anatomical, or chemical evidence, the only evidence they had any business to interfere with in the ca-

pacity in which they were employed, was surely an unwarrantable and an unconscientious degree of boldness."

ARSENIC.

Poisons seem to claim, at the present period, a marked attention; and Mr. Hill of Chester has entered into the use, forms and effects of this powerful medicine with much elaborate investigation. "To Dr. Fowler," he observes, "the medical world stands much indebted, for his accurate attention to the power and salutary effects of arsenic judiciously administered; and all those practitioners, whose practice has been most intermixed with cases of intermittent fever, treated by the tasteless ague drop, will doubtless bear testimony to the safety with which this Herculean remedy may be administered. But, notwithstanding intermittent fever in its most formidable shape has been cured by the arsenical solution, yet there have not been wanting alarmists to excite the fears of the timid, that the medicine created more mischief than it had removed, in various shapes, as tendency to hepatic obstructions, phthisis, asthma, &c. Of such results, I confess my entire ignorance. That such may have seemed to have occurred, I am far from attempting to deny; but I must continue to disbelieve they have happened when this poison has been administered with all that caution its great powers demand, and which has so diligently and successfully been employed, in respect to others, upon proper subjects. I adduce intermittent fever in its most hostile form, as that disease which must ever be highly illustrative of the tonic effects of arsenic. Impartially calculated, who will fail to decide on the positive value of that medicine, which can cure such a disease with speed, safety, and in the form of a few drops, after it has continued for weeks, or months, in defiance of disgusting quantities of cinchona, and all the minor tribe of tonic febrifuge remedies. Still I conjure my readers not to hastily conclude I am aiming at the establishment of a more extensive use of such a medicine, as arsenic is well known to be, when

others, less dangerous, and as certainly curative, will answer every purpose of the prescriber, and his patient, this being by no means the case. I merely contend, that terrific and mistaken apprehensions have caused it to be neglected, where its administration might have been greatly and safely beneficial. In some degree to dissipate these, consists my present intention; but never to bring forward a virulent poison as a healthful remedy to the exclusion of any other, not of this description, and which is equally salutary. To hesitate about preference here, would perhaps fall little short of criminality.

" Secondly, Want of attention to ascertain the exact and salutary mode of its application. Such have always hitherto been the antipathy to, and dread of arsenic, as an article in the list of curative remedies, that little attention has been bestowed upon the various preparations of which it is capable. The consequences are natural and evident; they have been very limited and ill defined. Had not such prejudices existed, to almost universal extent, this semi-metal would have undergone many more experiments than it has yet suffered. Hence, it will be no presumption to assert, that if the subject of this question had not had such obstacles to encounter; and, on the other hand, had experienced the attention which has been bestowed upon mercury, antimony, &c. &c. it would have been found as extensively useful an article as either of them. It appertains to the vile practices of charlatanism to announce concentrated preparations of certain powerful drugs, and ignorantly to boast of specifics for every disease; but men of just and enlightened views of science, with honourable intentions, shrink from even the appearance of mystery, and have but too frequent cause to lament the scantiness of powerful agents, to counteract the multifarious evils " flesh is heir to." That arsenic is a remedy of the description called tonic stimulant, is sufficiently ascertained: that it possesses great power in a very contracted sphere, when compared with

others of this class, is no less certain; finally, that its deleterious effects are as much under subjection as those of mercury, opium, antimony &c. &c. is or may be satisfactorily known.

"A saturated aqueous solution appears to be the most simple formula, and that which comes nearest to certainty of uniform strength of any other. Where the disease, its remedy, and the subject of both, can be judiciously adapted to each other, this medicine, from its great power in small volume, possesses decided and incalculable advantages. The sanguine wishes of young practitioner often lead them to attack violent diseases by very enormous doses of medicine, thinking to mow down, as it were, all opposition to their wishes, by *a coup de main;* but the mineral solution of arsenic is a weapon that will not admit of loose and inattentive application, in the hands of careless or over-eager practitioners, with impunity. It is almost superfluous to observe, its administration must commence with very small doses, when exhibiting it for the first time, and that its effects cannot be too narrowly watched: for there are to be met with certain habits, whose idiosyncrasy will cause it to be rejected, notwithstanding every precaution, in whatever dose given, or under whatever form; but this, it is well known, is not exclusively the case with regard to arsenic, the fact resulting from opium, digitalis, mercury, and even the bark itself. I lately attended a gentleman whose case appeared to indicate the use of this last mentioned valuable remedy; it was given in the simple form of decoction; a dose or two induced such feelings as are better comprehended from sensation than learnt from description. He soon informed me what he had been taking, although not apprised of the composition of his draughts; the medicine was then tried in another form, but was instantly discovered. "Sir," said he, emphatically, "you have been giving me bark again, and I cannot bear it." Such will occasionally be the case with arsenic. It is, however in this

view but on an exact footing with other remedies deemd sufficiently mild to persons in general. Symptoms announcing its disagreement are, nausea, pain, with a sense of contraction of the stomach, horripilatio, thirst, with a clammy tongue and fauces, increased by drinking any fluids, milky or oily ones excepted; strong feelings all over the body, such as were never experienced by the patient before, on any occasion, and which he is at a great loss to find words to describe.

In children, incapable of giving any description, its disagreement, whether from idiosyncrasy, or over-dose, may be known by its producing, soon after being taken, nausea, paleness of the lips, sleepiness, clamminess of the skin, at length vomiting, or purging, with great restlessness; but justice demands (from me at least) the acknowledgment that few such instances have fallen under my notice. It would be sacrificing time to point out what mischiefs have originated from want of attention to these circumstances, consonant to the position advanced, and in direct opposition to that accurate care, and close attention, which all other Herculean medicines require, and have indeed generally received.

"The next arsenical remedy which deserves notice is a pill, the formula of which will be found in the 2nd volume of the Asiatic Researches.—" Take of recent white arsenic 105 grains, black pepper 630 grains, beat well, in an iron mortar, for four days, at intervals; when reduced to an impalpable powder, remove to a stone mortar, add water by degrees, so as to form a mass of a pilular consistence: make pills of the size of tares, or small pulse (about 800); keep them in a dry and shady place; give one night and morning, with a little cold water: gentle cathartics precede their use with considerable effect." These pills are most conveniently preserved for use in a stone-bottle, originally destined to convey quicksilver. In the above work, arsenic is recommended as very useful in the cure of paralysis and cutaneous diseases; but too little is said on the subject.

"I think no mode of using it externally is mentioned; hence, the same errors are liable to operate, as have too often done, from its internal exhibition: for example, in the 1st vol. of the Medical Journal, p. 508, the case of a young woman is related, (by a Swiss physician), who had rubbed her head with arsenic pomatum to destroy vermin: the consequences, in six days time, were excruciating pains all over body, a general millet-seed-like eruption, covering the whole surface, violent swelling of the head, and with much difficulty she grew better. Now from this narration, what can be learned? We know nothing of the proportion of ingredients of this deleterious unguent, nor the quantity applied in the time specified; but judging from what may be every day seen in this country, when ignorant persons are intrusted with active remedies, without due precautions, it is reasonable to conclude the young woman was very bountiful in the use of what was to free her from her troublesome company; most practitioners having cause to regret how difficult it is to excite and procure due attention to the precise dose, and exact periods of administration of medicines, more especially those which, from their minuteness, are conceived, by ignorant persons, to be of little consequence. Arsenic, then, is perhaps that very remedy, in many violent and obstinate diseases, which can be advantageously exhibited in the smallest quantity, and with less necessity for augmentation of dose than any other, demanding simply, what every active medicine demands, attention, to render it generally and highly useful, as exemplified in the removal of the whole tribe of fevers and asthenic diseases, painful, local, or partial affections, and many tiresome cutaneous derangements; when acting favourably on the stomach, producing in a few doses, and in a short time, a greater quantum of increased tone of the system, than can be obtained by any other known agent. All circumstances proving favourable, the solution of Dr. Fowler, the simple saturated solution,

and the Asiatic pills, have been found, for many years, extremely beneficial, and much to be relied upon in the removal of the following diseases. Intermittent fever, typhus ophthalmia and palsy. The solution is the best form for the three first the pill for the last.

ELECTRICITY.

To the Editors of The Medical and Surgical Spectator.

Gentlemen.—ACCORDING to my promise in the last number of your valuable publication, I now beg leave to transmit you for insertion a few cases of suppression of urine cured by Electricity, which will confirm the observations I offered on Mr. Calderwood's communication, and shew that the size of the machine is of material consequence to the speedy accomplishment of such cures. By such a machine, permit me to state, the electric fluid can be conveyed with a force, energy and effect superior to what can be conceived, and this effect takes place in that mild active and unlooked for manner that pleases every patient, and renders the form of a shock in every instance unnecessary, the great bar as I formerly noticed, with patients to the use of this means of cure. In many diseases the superior operation of this machine compared with those of the ordinary standard and make, makes it seem to act like a charm, and as it were instantaneously, but this quick effect in subduing the morbid state is particularly remarkable in those affections connected with a suspension or impaired state of the nervous influence, and it is easily accounted for, if we once admit it, as contended for by most writers, that the nervous fluid and the electric matter are analoguous. In this case it is alone the quantity of matter thrown in that produces the cure by supplying the difficiency of secretion in the nerves. The preference therefore of a large machine in giving out at once the quantity required will be obvious; were it for the excitement merely that was

wanted then the force or shock with which it is directed would form the only point of attention ; but as all electricians must allow that the cure of diseases is seldomer effected by shocks than otherwise, so it is evident that the mere excitement is not the successful principle of cure. The accumulation of electric matter in the part is the great object, and this is only made quickly and with ease by an instrument of extensive powers. To shew this in a striking manner, and confirm the sentiments I have delivered, I shall now narrate some cases of diseases which fall under the denomination of those stated as depending upon a suspension or impaired state of the nervous influence, or spasm of the organs.

I. DERANGED SECRETION OF THE KIDNEYS.

Mr. J. a gentleman of a strong robust habit, was brought to me by Dr. Sequeira. For eleven days preceding he had laboured under a total stoppage of urine, and that there was no water in the bladder from the commencement of the disease was evident, by the abdomen retaining its natural size and figure. In the progress of the disease, he had been immersed no less than eight times in the warm bath : the two first immersions gave a delusory hope of cure, by his being enabled, while in the bath, to evacuate a teacupful of urine each time. But this remedy, which as well as every other Dr. Sequira's skill and experience could suggest, was found at last entirely to fail, and as a forlorn hope electricity was proposed by the Doctor to his patient. I had accordingly an opportunity of shewing its miraculous effects in this obstinate case, for no sooner was the electric fluid applied by vibrations than in less than half an hour it offered relief : at the end of that time he signified (as I had previously informed him would be the case) a desire to pass his urine. About half a pint was voided with perfect ease and in full stream. The operation was continued about half an hour longer, when the secretion became so copious, that he was obliged several times in

going home to alight from the carriage in order to make water, and during that day he did it at his house no less than 15 times on the whole. In the course of next day previous to his attendiug me, he had also many evacuations; the enlargement of his legs and thighs, which had become œdmeatous under the complaint; lessened gradually in proportion to the discharge, so much so, that I considered him convalesced, and that the malady was removed. I then consigned him again to the care of his physician, to whose liberality and candour in proposing electricity he was indebted for his life.

That a suspended secretion of urine had here occurred is evident, from the period of the complaint and the patient having passed no urine for such a number of days. The instantaneous effect of electricity is also a proof that its cause depended chiefly on the state of the secretory nerves. What is to be remarked in the mode of cure is the superiority of electricity to all the powers of medicine. We possess no particular medicine, it is well known, whichacts exclusively on any of the secretions. It is only therefore by a general action on the system that any particular secretion can be influenced, which must render at all times its operation uncertain. Independent of this, all internal medicines, by acting on the stomach and bowels, must tend to injure them, though they relieve the disease. Hence the advantage of a power which confines its operation to the particular secretory organ diseased, which is certain quick and safe in its operation, and which does not act either on the stomach or bowels or interupt their offices.

II. SPASM OF THE URINARY ORGANS.

Nor is Electricity less powerful in these cases of spasm which come from an obstruction of the urinary organs, in consequence of calculi or urinary concretions obstructing the kidneys or their outlets. Of this kind, I shall subjoin the following case:

Miss L—— applied to me on the 23d of September, 1796,

for a violent pain in her loins, which extended round to her left groin with great severity. From the situation and violence of the symptoms, I judge it to be stone obstructing the the mouth of the left ureter: she was electrified accordingly: in about an hour after the third operation, passed a ragged stone of considerable bulk. I was certain from the effect produced by the second, that the obstruction was nearly removed, she having immediately after voided very high coloured water, mixed with an uncommon quantity of sand. Her health, from the time she passed the concretion was perfectly re-established, excepting a slight degree of numbness in her lower extremities, which, a few days continuance ot the electric vibrations, was entirely removed.

III. ATONY OF THE BLADDER.

A more frequent disease than the former, where electricity succeeds in a manner almost miraculous, is suppression of urine which are connected with an atony of the organ. These suppressions are known to succeed the recovery after many acute diseases, as continued fevers; and the same is a very common complaint in old age. In these cases the powers of the organ are so weakened, that the contraction of the bladder cannot overcome the resistance of the sphincter. Of this complaint, the first case will shew how quickly the disease was removed, and the healthy action of the bladder restored before the patient left the room.

How superior, then, is the application of electricity here to the use of the catheter; the only means which can be depended upon for giving even a temporary relief to the patient. The introduction of such a hard body through the delicate irritable passage of the urethra, it is clear, must do infinite injury. By forcing the sphincter at the neck of the bladder, it will still more weaken those parts already in a weakened state; and either increase the disease, or

or produce what is worse, incontinence of urine. Electricity on the contrary, by rousing and invigorating the natural powers and action of the organ, enables it to recover its functions, and to do its own work.

I am, Gentlemen, your obedient Servant,

F. LOWNDES.

ON MEDICAL ELECTRICITY.

To the Editors of the Medical and Surgical Spectator.

Gentlemen—I PERCEIVE in your last number a communication from Mr. Lowndes, medical electrician, in consequence, as he says, of one from me in one of your last numbers. When Mr. Lowndes understood that the cure by electricity, (a circumstance which I am convinced neither he nor I will doubt) was tedious, I fear he misconceived some part of the statement of the case in question, which I am sure so strenuous an advocate for electricity as he, could not have done intentionally. The truth of the matter is, that though the cure altogether certainly was tedious, yet Mr. Lowndes, if he resort to it, will find that it was soon accomplished, after recourse was had to his favourite remedy. This circumstance I suspect escaped him in his great anxiety to establish a transcendant superiority of his own apparatus (the largest in this country) over those employed by surgeons in general.

It is an axiom, I believe, pretty well established in our science that in proportion as any active remedy is capable of doing good, when properly applied, that it is also capable in the same proportion of doing mischief, if it should unfortunately be unnecessarily or altogether misapplied. And though I have no doubt, Gentlemen, of the perfect innocence of a machine so large in the hands of a person of so much discretion, discrimination and anatomical skill as Mr. Lowndes, yet I must own I should be very apprehensive of the consequences of letting loose such an element as elec-

tricity indiscriminately on his Majesty's liege subjects under the direction of any person not so gifted in those particulars as Mr. Lowndes is well known to be. For my own part I am perfectly satisfied with the limited powers of my own portable apparatus, with which I can, at any time, produce power as far as, and considerably beyond what, from the relative susceptibility of parts with vitality, it would be prudent to call forth. For in the application of a stimulant such as electricity, care ought always to be had, and the idea never lost sight of, that the susceptibility of the part to be acted upon, should not be so so far exhausted but that should this peculiar stimulus eventually fail, other stimuli may, not without some prospect of success, be had recourse to. The case then alluded to, we are told, would have been cured by one application from the powerful machine he uses. I have said no greater power was used than that species of shock or vibration which is sent by the tube of the Leyden jar. The effect of this is to produce a great vibration in the muscular fibres, without inducing the pungent sensation of the shock, by passing the whole charge of the jar, which the patient could not bear; nor would it have been prudent in me to have done it, considering the diseased state of the prostrate gland and bladder. The machine I use has a cylinder of eight inches fitted up on the most perfect principle, with a power sufficient for all medical purposes, and equal to the most destructive. The first case which attracted my attention to electricity was a schirrous inguinal gland, the size of an egg, which resisted every means used by myself, and the late Mr. Fearon, and an hospital surgeon of eminence. The patient, a young man, returned to me in the same state, the disease baffling the skill of those gentlemen. I proposed electricity; he very readily assented to any treatment that promised the slightest hope of benefit. I endeavoured to send small shocks through it, but they in general passed over it: I asked him if he had resolution to permit

me to use it stronger:—he agreed. I then passed the full charge of the medical jar completely through it. The next day I perceived it was divided into two distinct portions: a few more shocks in different directions occasioned a great many more divisions: in this state he left me, and after a few months the whole disappeared.

This is a proof that the size of the instrument is no imperfection, for although the patients in both cases declared they could not bear stronger applications, yet had it been necessary, more powerful vibrations and shocks could have been used by a larger jar or combination of jars or battery even to destroy life.

I do not then, Gentlemen, see the utility of possessing power beyond what it is prudent to use, unless arrogating to ourselves the power of the deity over another element, we should wish to controul *this* so as sometimes to be able to destroy that which we are not able to restore.

Though once very sanguine as to my hopes that the peculiar modification of electricity denominated galvanism might be made subservient to the best of purposes in the treatment of many diseases, yet I own those expectations are fast vanishing.

I am now of opinion, that it is not necessary (as an application to parts endowed with vitality) to concentrate this active agent in a degree beyond what we are able to do from our knowledge of it, previous to the brilliant discovery of the ingenious Galvani.

I remain, with respect, Gentlemen,

Yours, &c.

R, CALDERWOOD.

Great Surry Street,
Jan. 16, 1809.

COMMUNICATION OF MR. THOMAS HARDING, OF THE SURREY DISPENSARY, ON A NEW AND SIMPLE REMEDY IN GOUT.

To the Editors of The Medical and Surgical Spectator.

Gentlemen.—If, when opportunity suits, you will give publicity in your excellent and widely circulating Journal to the following, you may do much good, for you may be the means of preserving many valuable characters from dissolution, many happy families and friends from the sharpest distress, and many perhaps from ruin.

A NEW MODE OF SAVING LIFE WHEN IT IS THREATENED.

Gout.—This most singular and most dangerous complaint often attacks suddenly the stomach, or head, or both, and other vital parts; and fixes itself so firmly as to baffle every endeavour for removing its action to the extremities, and every effort for relief. The strongests stimulants by the mouth, with or without annodynes, rubefacients to the extremities, blisters to them, sinapisms, the flesh brush, heat, however used, are of no avail: excruciating pains continue, and the unhappy patient is left to lamentations and wishes only, until death arrives and terminates his sufferings.

A long time ago it occurred to Mr. Hayton, a well informed practitioner, late of America Place, Southwark, at present of Great Guildford street, whose moderation and modesty has not nor would now permit him, (fearing also that it would be considered a species of quackery), to give the suggestion to the world himself, nor scarcely allow him to consent for his name to be mentioned on the occasion by any other, notwithstanding the simplicity and harmlessness as well as value and importance of the mode, it occurred to him, when thinking on these things, that if in such cases, a blow with a piece of board was given on the bottom

of the foot, so as to occasion a sharp and sudden shock to the whole habit, the strong diseased action in the vital part might be almost instantly arrested, a gouty one set up in the extremity, and relief immediately obtained; which, if it did not prove permanent, might afford a valuable opportunity for employing other remedies with effect, both locally and generally.

With this impression strongly on his mind, he resolved to make experiments as often as fair opportunities offered. In the mean time, it may be well to make it known for general benefit, and that trials may be multiplied to assist in determining its efficacy. Cases similar to those intimated above, do not frequently occur to one particular.

But it is not only in cases similar to those intimated above, at the latter end of the affection, namely, and after every other method had failed, that Mr. Hayton recommends the employment of this mode, but at the beginning also as well as latter end of the malady, before as well as after other remedies, and indeed in every state and stage of the attack and treatment. That it has been of use at the very onset the following case will testify.

But first, it may be observed, what will be at once admitted and affirmed by all podagrics, and strongly evince the probability, at least, of benefit, that the feet are always in a high state of sensibility at these times. There is always a peculiar gouty feeling in them, moderate perhaps, but remarkably and strongly connected, some how or other, with the severe diseased action in other parts of the habit.

CASE.

Mr. Day, of Union Hall, aged 53, of a corpulent and very gouty habit, was suddenly affected in the forenoon of yesterday with severe pain in his head, attended with great faintness, prostration of strength, and loss of voluntary motion. Mr. Hayton and myself saw him immediately, (happening

to be near at the time,) and found him placed in a chair with a countenance pallid and even ghastly; a pulse small, contracted, quick and tremulous, and incapable of articulating distinctly. In some minutes, however, he so far recovered as to be able to mention his state, when he said he had a severe pain in his head, principally at the back part; that he felt extremely faint, and that he could not see.

Apoplexy and paralysis were somewhat characterised, but the affection seemed to be the consequence of gouty action.

Under this impression, the stocking on the right leg was taken off, and a sharp smack given on the bottom of the foot with the back part of a shoe-brush (being nearest at hand) when he almost instantly exclaimed, "I am better, I can see."

In about ten minutes, however, he began to relapse; had now also a pallid ghastly countenance, and was soon deprived of all sense and motion, when Mr. Hayton, who remained with him, thinking the one stroke before given not sufficient; again removed the stocking and gave two more sharper than the first, when he instantly recovered, and the pain left his head.

It is surprising, but his countenance also became almost immediately as usual, when in health.

He had a moderate stimulant, given with something warm, was put to bed, his foot being enveloped in flannel, and in less than half an hour a genial warmth was diffused, and he became comparatively well, and so continues.

A bottle of hot water was applied to the foot, in which, it should have been observed, gouty pains arose, after the third stroke, and in the leg also.

Sometimes the manner of attack renders it impossible to exhibit any thing by the mouth, and blisters, rubefacients, &c. &c. to the extremities are very tardy in their operation. The patient may not only suffer an unnecessary length of time, but be actually lost before benefit can be derived from

them. This mode is applicable at all times and under all circumstances, and though simple, yet powerful; though innocent, yet active and efficacious.

A ferrula, it may be right to notice, similar in form to those used in schools, might be better than a piece of plain board; and it should be made so as to smack soundly, but not bruise. Perhaps about four inches in diameter, and half an inch thick. This might be kept in all gouty families, and by the bedside in all appearances of need.

An heir loom, ah!

The smack should be very sharp; as unexpected as possible, and as much on the ball of the foot as possible: repeated too, if necessary, and on both feet if required.

Mr. Hayton also observes that a similar mode of proceeding might be adopted with good effect perhaps in most other sudden and severe affections, and in most kind of fits. Apoplexy, Epilepsy, Paralysis, Hysteria, &c. He thinks it may be of use when Erysipelas attacks the head severely, which is sometimes the case.

Perhaps it may be agreeable to you, Gentlemen, to invite and receive accounts (post paid) of experiments and of cases on the foregoing subject, and to insert them occasionally in your valuable work. But if receiving will be too much trouble, I will with pleasure transmit them to you without further trouble to the writer, if addressed (post paid) as under. Public benefit is the great object: and if we can save but one good person from death, or one good family, or friend, from severe distress, we shall be amply repaid for our trouble, in the satisfaction it will afford.

With many apologies, for the length of this, I subscribe myself,

Gentlemen, your very obedient Servant.

THOMAS HARDING.

18, *Union Street, Sonthwark, January* 19, 1809.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—I HAVE just perused Dr. Lambe's late publication on Cancers:—Such another book, for its comprehensive and *important* information, I will venture to affirm, has not made its appearance for these many years:—I except none. I trust you will believe my enthusiastic praises of it to be at least *conscientious*, when I have assured you that I not only never was acquainted with Dr. Lambe, but that I do not even know him by sight.

Unfortunately for the welfare of mankind, *our great folks* are too busy, just now, about schemes of *maniac warfare*, to bestow one serious enquiry, one serious thought on the important truth contained in that *little* yet *great* production.

Yet I will venture to assert that it is as deserving of their notice and interference as any discovery that ever was made—not even the *Jenerian expediency* excepted.

One observation I have however to make, which struck me on reading this book, and which perhaps has been overlooked by Dr. Lambe:—that is, that if distilled water be essential to our *perfect* state of health, how can we reconcile this to a natural state of existence? For if divine providence intended us to drink water at all, it would follow that in a state of nature, we should have to drink it with all its impurities, by bending ourselves down to whatever stream we met in our way, as animals are accustomed to do. Hence it would appear that either water was not intended for our beverage, or that if it was, we should take it with all the impurities with which it may chance to be impregnated.

But another reason may perhaps be brought to aid us in solving the above contrarities to Dr. Lamb's system:—Is there not a *material* difference between taking water into the stomach as we would *naturally* take it, that is by going to the stream or river, and bringing our mouths in immediate contact with the water, and our present way of procuring it for

consumption? In the first instance we would take it with all the active principles, not forgetting the living animalcules with which water more or less abounds, and immediately convey it into the stomach. So taken they are perhaps calculated to render the beverage rather wholesome than otherwise. But in the last, by first conveying it into pipes, then into reservoirs, and again into confined rooms, &c. do we not in part destroy these principles long before it is conveyed into the stomach, thereby giving them time to evaporate, and to the animalcules, if it contains any quantity, to putrify, and consequently poison the water which in its original state was salubrious?

This opinion, Gentlemen, may prove on further enquiries erroneous, but I submit to your judgement the propriety of its insertion, as calculated to throw some light on an important subject.

I remain, Gentlemen,
Your obedient Servant,

Jan. 21, 1809. M.

COMMUNICATION ON THE EXTENSIVE USE OF MINERAL PREPARATIONS IN THE PRACTICE OF MEDICINE.

To the Editors of The Medical and Surgical pectator.

Gentlemen.—There seems to be a fashion in medicine, at, present to prefer chemical preparations, in the treatment of diseases, rather than draw our resources from the vegetable kingdom. This, perhaps, may be accounted for from our greater prepossession in favour of chemistry than pharmacy, and the supposed application to the one science over the other. The remedies of the mineral kingdom, it must be confessed, are not of that assimilating nature as the vegetable productions: neither do we conceive that their combinations and new arrangements in the system can be easily and certainly established before hand with the same ease as veget-

able productions. The principles of vegetables are well understood, and the manner in which they act somewhat clear and determined. The principles of minerals are in many respects conjectural and obscure, and dependent on accidental circumstances, in the degree and extent of their action. If a narcotic is given in a certain dose, we know it will have a determined effect; but if a mineral preparation is exhibited, its operation will be varied by the present state of the stomach, and the new combinations which it is accordingly ready to enter into, dependent on the presence or absence of certain matters, for which it has a greater or less affinity.

Antimony and mercury are the great minerals which have been valued in practice, and the former, till of late years, certainly held a preference over the other as a general remedy. Mercury has, however, now gained the ascendancy; and, whatever blame may be attached to empirics for their indiscriminate use of it, regular practitioners are perhaps running fast into the same error. Many very able physicians of the metropolis, we understand, prescribe little else than calomel, and such is the rage for this preparation in every state, that even patent calomel has been prepared and advertised. I am much of opinion that this remedy should not be used in such an extensive manner as it is done in the period of infancy. Calomel is the great catholicon for the complaints of children. It is used to cure every indisposition to which they are subject, from the most trifling ailment to the most alarming malady. However proper it may be to excite large evacuations in certain circumstances, it cannot be good to do it at all times; and mercurial oxyds given frequently are dangerous at a period when the constitution is forming, by the abstraction of that solid matter so necessary to give strength and finishing to the fabric. Many serious consequences, I know, have resulted of late from the large administration of calomel in the hands of a certain physician of the metropolis.

Exfoliation of bones has been known to take place under his practice—a sufficient proof that it was improperly exhibited. Borrowing our ideas of treatment from the practice in the warm climates is to be condemned. Circumstances of constitution, as well as the nature and progress of the diseases, materially change the principles of cure. A constitution that cannot now bear bleeding to any extent, which most practitioners will assent is the state of habit of the present day, can far less bear the large use of such a Herculean remedy as mercury. These observations are called for by the present mode of practice; and I shall be glad to find my opinion confirmed by others.

I am, Gentlemen, Your obedient Servant,

THE GHOST OF SYDENHAM.

Bath, Jan. 15, 1809.

MISCELLANEOUS.

The application of Poetry to Medicine is of very great antiquity. The rules of the School of Salernum are all written in verse. Fracastor has used its imagery with beautiful effect in describing the Venereal Disease. Armstrong's *Art of preserving Health* is in the hands of every one who has taste to relish elegance of language, and good sense to appreciate its maxims. Downman's *Poem on Infancy* contains all the necessary instructions of which that delicate period stands in need by those who have the charge of it.

We are much obliged to our classical correspondent, Mr. Oakes, for sending us, from the seat of the Muses, the subjoined Latin Verses on the subject of Hydrophobia; a disease so much the terror of the day.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—The following copy of verses was written by

an old Physician several years since; and if they are worthy of your publication, they are at your service.

I am, Gentlemen, yours,

Cambridge, Jan. 22, 1809. T. V. O.

IN RABIEM CANINAM.

Torret agros radiis nunc Sol altissimus omnes
Depositisq; petunt Sylvarum falcibus umbras
Tam Messatores, Æstu victi atq; labore.———

Cur Canis haud solito quærit pro more magistrum,
Et cur non blandæ gannitu vocis adulat,
Cur jacet abjectus demissâ in gramine caudâ,
Cur non latratu, sed rauco murmure tantum
Accipit ignotos, cur frustula grata recusat;
Curq; gravi passu passus comitatur heriles,
Nec ludens campos late velut ante vagatur,
Miratur Corydon, comitis miratur ocellos
Non fervescentes, non ulla luce micantes.
At Canis infectus funesti tabe veneni
Sentit iners intro sævi contagia morbi
Serpere, prænoscensq; solet miserabile fatum;
Vix memor ipsius Domini, sed dente maligno
Irruit in cunctos, spargitq; miasmata morbi,
At subito sævit virus, carpitq; Medullos;
Tum Canis infelix, Dominiq; oblitus, anhelans,
Exsertâ linguâ, per devia nescius errat.
Nunc rapido cursu, nunc lento; multa per ora
Exhalans spumosa, febrisq; ardore perustus
Quærit aquas, horret visu tremefactus aquarum,
Quam subitoq; caput retrahit seu saucius ictu,
Et redit ad lymphos, nec fluctus accipit ore;
Nec sentit fatiq; genus, mortemq; veneni
Sed putat esse sitim—sed livida lingua calorq;
Intus agens, et quæ circumfluit albida rictus
Pestiferos spuma, et quasi pulvere conspurcata
Lumina, inæquales passus, genus omne Caninum

Hunc vitare monent dirâ contage gravatum.
Tanta diu tolerare nefas mala; Mors rapida instat.
* Feles atque Canes cur non teterrima solos
Pestilitas vexat, tactûs contagibus absque pestis.
Cur solam hanc rabiem vulnus disseminat, et cur
Noxia fit tantum commisto sanguine pestis,
Fertilis in mortes, aut quid secreta nocenti
Miscuerit natura tui, non cura laborq;
Noster scire valet, nisi qnæ vulgata per orbem
Fabula pro vera decepit sæcula causâ.
(Febre laborantes *Homines* aliquando videmus
Hydrophobos fieri, nec fatum dente minantes)
Cæterum dum torquent animalia membra labore
Sudorem videas fundentia corpore toto.
His cutis arctantur densè spiramina, rodunt
Sanguinis inde sales cerebellum mordicus; aut quod
Alba subest linguæ vermis, se sive recondit
In sinubus frontis; vel viscera tenia pungit
Excruciatve dolor dentes, aut sævior aures.
Dentibus exceptum non nunquam virus in annos
Se condit tacitè latitans in corpore, vanâ
Spe ludens miseros felicia tempora vitæ
Ducendi, et placido claudendi lumina letho.
Exerere Hebdomadis paucis plerumq; suëscit
Pesteferas vires, et certa morte timendas ——
Vulnera parva lieet, nullam minitantia noxam
Absque dolore omni, paucisq; imbuta salivis
Sanenturq; cito, & vestigia nulla cicatrix
Impressi dentis monstret; per corpora tota
Insinuat morsis tamen horrida gutta veneni.
Mox dolor exoritur pungens ubi vulnere primo
Infusum virus venis, volat impetu miro
Ignea vis, subitoq; pererrat singula membra.
Occupat et vertigo caput, fit nausea, sordes,
Ecce ærugineas Stomachus comitante Screatu

* Genus Caninum, Lupos, Vulpes,
—— Felinum, Tigridas, Pardos comprehendit.

Evomit, excruciant Singultus, Pectora anhelant,
Somnia terrificant, gravitas in corpore, torpor,
Signaq; dejectæ mentis suspiria reddunt
Sponte sua ejicitur Semen, genitaliaq; æstu
Tensa dolent, urget mordax stranguria, fauces
Viscidus obturat mucus, sitis; Horror aquarum
Visarum savus, Speculi solidive nitentis,
Exagitat nervos, totos tremor occupat artus,
Latrantiq; Cani similis nox edita terret
Astantes, mens mitis, contans; æger amicos
Admonet ut fugiant lethalia vulnera dentis.
Extorquent spasmi vitam, vel lenia somni
Munera deducunt auimas *Acherontis* ad oras.
Nec ratio remedi communis cognita certo;——
Sunt qui confidunt argenti in flumine vivi,
Aut maris immergunt miserorum corpora in undas,
Nec prius inde trahunt quam magno extincta Animäi
Pars sit; vel sævi candentis viribus Ignis
Exurunt partes, cultrove exscendere acuto
Audent, ut Tabo viviscens diffluat ulcus.
Antidotis male credendum est quæ Somnia monstrant,
Sitve *Cynorrhodon*, aut rabidi Canis ipsius Hepar.
Pluraq; multoties quæ fabula jactat anilis;
Morbus, ni sanet Ferrum, immedicabilis angit;
Solaq; Spes miseris, nullam sperare Salutem.

MEDICAL INTELLIGENCE.

Joseph Miller, servant to Mr. Bates, of Holmfirth, near Huddersfield, Yorkshire, died last week of Hydrophobia, occasioned by having suffered, five weeks before, a dog, which afterwards proved to be mad, to lick the wounds on his hands and face. This proves Dr. Caton to be correct, who stated in his last communication, that it was only necessary that the saliva should come in contact with some animal fluid to produce the disease.

VACCINATION.

In pursuance of the Resolution of parliament passed in the last Session, a

National Institution for promoting Vaccination, is established under the management of a Board, which consists of the following Members —

Sir Lucas Pepys, Bart. President of the Royal College of Physicians; Dr. Mayo, Dr. Heberden, Dr. Satterley, and Dr. Bancroft, Censors of the College; George Chandler, Esq. Master; and Robert Keate, Esq. and Sir Charles Blicke, Governors, of the Royal College of Surgeons.

The Board have appointed the following Officers:

Director, Dr. Jenner; Assistant Director, James Moore, Esq.; Register, Dr. Hervey; Principal Vaccinator, J. C. Carque, Esq.; Vaccinators at the Stations, Charles Aikin, Esq. T. Hale, Esq. Richard Lane, Esq. Edward Leese, Esq. S. Sawry, Esq. and J. Vincent, Esq.—Secretary, Charles Murray, Esq.

St. Salvador, (Brazil), July 19, 1809.

Art. 2. The vaccine inoculation was first practised in St. Salvador towards the end of the year 1804, and from thence spread through all the provinces by order of the Prince of Brazil, who appointed Dr. J. A. Barboza to superintend and promote the new practice, and so beneficial have been its effects, that the small-pox, which was very destructive here, has almost totally disappeared.

In the cancerous ward of the Middlesex Hospital, we are given to understand that the intelligent Physicians of that Hospital are going to give the distilled water and vegetable diet a trial: we think it a just tribute to humanity, and solicit the result of the investigation.

Dr. Herdman has been appointed Physician to His Royal Highness the Duke of Sussex.

Dy the death of Dr. T. Beddoes, physic has lost one of her ablest practitioners, and philosophy a profound disciple. As an author he was admired, as a man loved. Generation will succeed generation before such bright luminaries as a Black, or a Beddoes will adorn the lemisphere of science; the many laws of the physical action and reaction of Chemistry by his well directed labours, has opened an ample field for medical inquiry and illustration, the just attributes of practical knowledge. As the founder of a new practice, grounded upon the intimate knowledge of the effects of the lungs, and the agency of oxygen in the system, Dr. Beddoes met with strong opposition; which opposition, fortunately for society, called forth the exertions of Dr. Darwin, Percival and others, who hesitated not to deliver their unbiassed testimony in his favour.

The Death of Dr. Richard Lubbock deserves also to be mentioned. He was an eminent Physician of Norwich, and particularly excelled in his chemical knowledge. His practical opinions of medicine were framed on the theory of Dr. Brown, but applied with judgment and discretion. He was considered in practice as a successful physician, and enjoyed a very high degree of public confidence where he resided. We shall, in a future Number, extend these sketches of Biography as they regard Dr. Beddoes and Dr. Lubbock.

Dr. James Hamilton, of Finsbury Square, has been unanimously appointed Physician to the London Dispensary.

NEW MEDICAL PUBLICATIONS.

Anatomia-Chirurgical Views of the Nose, Mouth, Larynx and Fauces, with appropriate explanations and references to the Plate. By John James Watt, Surgeon, Folio. Plain, 1l. 1s. 6d. Coloured, 2l. 2s.

The London Medical Dictionary, including, under distinct heads, every branch of Medicine, viz. Anatomy, Physiology, and Pathology; the Practice of Physic and Surgery, Therapeutics and Materia Medica; with whatever relates to Medicine in Natural Physiology, Chemistry and Natural History; illustrated by a great number of Plates elegantly engraved. By Bartholemew Parr, M. D. &c. 2 vols. 4to. 4l. 16s. boards.

Reports on the Effects of a Peculiar Regimen on Schirrous Tumours and Cancerous Ulcers. By William Lambe, M. D. Fellow of the Royal College of Physicians, 8vo. 5s. boards.

Treatise on Scrofula. By James Russell, Fellow of the Royal College of Surgeons, and Professor of Clinical Surgery, in the University of Edinburgh, 8vo. 5s. boards.

IN THE PRESS.

The Practical Materia Medica, in which the various articles are fully described and divided into classes and orders according to their effects, their virtues, doses, and the diseases in which they are proper to be exhibited, are fully pointed out; interspersed with some Practical Remarks, and some Select Formulæ; intended principally for the use of Students and Junior Practitioners. One volume duodecimo.

Cooper's Dictionary of Practical Surgery, 8vo.

Hooper's Physician's Vade-mecum, &c. 8vo.

A Treatise on Cheltenham Waters and Bilious Diseases; the second edition. By Thomas Jameson, M. D.

Diseases and Casualties in London in the Year 1808.

Abortive & Stillborn	462	French Pox	28	Spasm	15
Abscess	49	Gout	33	St. Vitus's Dance	1
Aged	1555	Gravel, Stone, & Strangury	18	Stoppage in the Stom.	12
Ague	5	Grief	5	Teeth	319
Apoplexy & Suddenly	229	Headmouldshot, Horseshoehead, & Water in the Head	193	Thrush	48
Asthma and Phthisic	586	Jaundice	39	Tumour	1
Bedridden	3	Jaw Locked	2	Worms	3
Bleeding	28	Inflammation	765		
Bursten and Rupture	26	Lethargy	1	Bit by a mad Cat	1
Cancer	54	Livergrown	14	Bit by mad Dogs	3
Canker	2	Lunatic	172	Bruised	1
Chicken Pox	3	Measles	1386	Burnt	51
Childbed	172	Miscarriage	2	Drowned	123
Colds	11	Mortification	200	Excessive Drinking	7
Colic, Gripes, &c.	19	Palsy	98	Found Dead	17
Consumption	5220	Piles	1	Fractured	2
Convulsions	4164	Pleurisy	17	Frighted	1
Cough, and Hooping Cough	326	Purples	1	Frozen	2
Cow Pox	1	Quinsy	3	Killed by Falls and several other Accidents	77
Croup	76	Rheumatism	7	Killed themselves	36
Diabetes	2	Scurvy	2	Poisoned	3
Dropsy	870	Small Pox	1169	Scalded	5
Evil	8	Sore Throat	9	Starved	2
Fevers of all kinds	1168	Sores and Ulcers	5	Suffocated	4
Fistula	1			Total	335
Flux	10				

Christened	Males 10189	Females 9717	In all 19906
Buried	Males 10228	Females 9726	In all 19954

Whereof have died,

Under Two Years of Age	6075	Fifty and Sixty	1690
Between Two and Five	2466	Sixty and Seventy	1499
Five and Ten	847	Seventy and Eighty	1200
Ten and Twenty	643	Eighty and Ninety	504
Twenty and Thirty	1200	Ninety and a Hundred	65
Thirty and Forty	1792	A Hundred	1
Forty and Fifty	1971	A Hundred and Two	1

Increased in the Burials this Year 1620.

This Register exhibits a considerable increase in the proportion of deaths under two years of age, the whole number of deaths exceeding the preceding year only 1620, and the mortality of children under two years of age greater by nearly 500 than in either 1806 or 1807. This may be accounted for by the great increase of measles, which exceeds every thing that can be produced in any former years. It is also well known that inflammatory diseases have been more severe and frequent than usual. The Yearly Bills, inaccurate as they are, confirm this; as well as most other facts on a large scale. The number of deaths by Croup is greater than in either of the two preceding years; and under the general term of "Inflammation," the difference is not less remarkable. The deaths by Small Pox are 128 less than last year, and 11 more than the preceding year.

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EMPIRICISM.

THE functions of respiration, and the changes it induces on the system, have opened a wide field for what we may term Scientific Empiricism. Chemistry has laid the foundation of this, and her pneumatic discoveries have been applied with a bold speculation to arrest the progress and effect recovery in many hitherto incurable diseases. The instruments thus offered were first seized on by the genius of a Beddoes, and made to acquire for a time some reputation in his hands; but though moulded with some judgment by him, and capable of giving even to his failures the plausibility of success, they were but clumsily employed by the talents of inferior practitioners. We blame not a Beddoes for the attempt; but we consider the present perseverance in their use as a species of Charlatanism highly to be condemned, as those means of cure are now to be considered, when regarded as medicines, only as airy nothings. This line of practice, started by regular practitioners, was soon taken up by the empirics, who, if they could not imitate the principles of cure, at least gave such an imposing appellation for the time to their nostrums, as the Vital Wine, Vital Pills, Oxygen Gas, &c.

But we shall examine the principles of pneumatic practice in detail, first stating the airs or gases which have been employed.

Mr. Watts's apparatus is the only mode of exhibiting them yet resorted to. This apparatus consists of an alembic, of a long pipe, conducting to the refrigeratory, of a refrigeratory of considerable size, of a hydraulic bellows, into which the gas is conveyed from the refrigeratory, in order that it may be farther cooled, and of an air holder, into which a transfer pipe discharges the air from the hydraulic bellows. (Vide Beddoes on Airs, part II. p. 3.)

Vital Air.—Vital air is procured by exposing simply black oxyd of manganese to a red heat, or by mixing it with two parts and a half of sulphuric acid, adding a moderate heat, when a large quantity of this air is separated. When fresh made, it is rather unfit for medical use, as containing in it a quantity of the manganese suspended, and some caustic lime should therefore be well mixed in the water of the refrigeratory, or it should be kept 12 hours in the air holder before it is used. In using, it is sometimes employed, in urgent cases, undiluted, but more commonly it is mixed with atmospheric air, from 20, 30, to 50 quarts of atmospheric air with two of vital air, employed once a day, is a common course in chronic diseases, gradually lessening the frequency of its application, according to circumstances, and even intermitting occasionally, when general appearances of inflammation, as a white tongue, &c. appear.

The effect of this dose is to diffuse a sense of warmth through the body, and to occasion a suffusion of colour over every part, and to render the pulse slower and fuller.

Dephlogisticated Nitrous Air is obtained by exposing nitrous gas to wetted iron filings, or moist sulphuret of alkali. It may be inhaled either pure, or in a varied proportion with atmospheric air, according to circumstances.

Carbonic Acid Gas, or Fixed Air, is obtained in its purest state, by heating chalk or calcareous substances red hot, and admitting to it small quantities of water, by which

the fixed air will be disengaged; or it may be procured by pouring dilute sulphuric acid on chalk, and allowing the gas to pas through water, and be inspired through a tube in that state.

These inhalations may take place for 20 minutes, occasionally breathing an inhalation of atmospheric air, and they may be repeated four or five times a day, unless pain of chest, or other symptoms arise, that occasion it to be desisted from.

Hydro Carbonate Air is a modification of the former, and procured by heating charcoal to redness, and dropping water upon it. The water should be admitted very slowly, and lime should be mixed in the water of the refrigeratory, to prevent any contamination in the process, and this air is best used fresh made. From the great powers of this air it requires, in using it, that the dose be measured out with great accuracy, and its proportion should not be more than one part to 15 of atmospheric air.

The utmost care should be taken in preparing it that the charcoal be previously well calcined.

To facilitate the exhibition of this, an arrangement of different standards or changes of atmospheric air has been proposed by Dr. Beddoes in the following manner :—

Thus 28 parts being the proportion of vital air usually present in the atmosphere, he has altered it by the addition of successive equal parts of it to one of oxygen, thus :—

TABLE I.

	Oxygen.	*Azotic.*
1 part of atmospheric to 1 of oxygen	64	36
1 of atm. to do.	52	48
3 do. to do.	46	54
4 do. to do.	42	58
5 do. to do.	40	60
6 do. to do.	38	62

		Oxygen.	*Azotic.*
7 of atm:	to 1 of oxygen	37	63
8 do.	to do.	36	64
9 do.	to do.	35	65
10 do.	to do.	34½	65½
11 do.	to do.	34	66
19 do.	to do.	30½	62½

TABLE II.

The standard is altered in the following manner, by addition of successive equal parts of oxygen to one of atmospheric air:

		Oxygen.	*Azotic.*
2 oxygen	to 1 atmospheric	76	24
3 oxygen	to do.	81	19
4 oxygen	to do.	85	15
5 oxygen	to do.	88	12

TABLE III.

Effect of the addition of different portions of atmospheric to one of unrespirable air.

		Oxygen.	*Unrespir.*
1 atmospheric	to 1 unrespirable	14	86
2 do.	to do.	19	81
3 do.	to do.	21	79
4 do.	to do.	22	78
5 do.	to do.	23	77
6 do.	to do.	24	76
7 do.	to do.	24	76
8 do.	to do.	25	75
9 do.	to do.	25	75
10 do.	to do.	25½	74½

TABLE IV.

Effect of the addition of different portions of unrespirable airs to one of atmospheric.

		Oxygen.	*Unrespir.*
1 atmospheric	to 2 unrespirable	9	91

		Oxygen.	*Unrespir.*
1 atmospheric	to 3 unrespirable	7	93
1 do.	to 4 do.	5½	94½
1 do.	to 5 do.	5	95

The above Tables, though ingenious, and on that account deserving the praise of chemical knowledge and arrangement, we are sorry to say, are no way applicable to the cure of diseases, or as leading to any successful views in practice. All the gases which contain a greater proportion of oxygen than belongs to atmospheric air, in the same proportion are apt to excite inflammation; and all those again which exceed in their proportion of azote beyond the due quantity established in atmospheric air, are liable to induce in the same degree symptoms of apoplexy, accumulation in the brain, and atonic state of the nervous system. These effects of the pneumatic medicines were clearly ascertained by the French chemists, particularly Chaptal; and the point being established, the matter was left at rest, and no more mischief done by the experiments; but in this country it has been different. The introduction of the airs was a new species of medical trade. It was a fine speculation to amuse, and fill the pockets; and the line which the genius of Beddoes had chalked out, when abandoned by him, was prosecuted by inferior agents without success; for this was a fact which every chemical physician must have been convinced of; that it could not be applied without infinite injury to those who were unfortunate enough to put themselves under their care. Even in the hands of a Beddoes, the consumptive patients had their lungs inflamed by the pneumatic applications, which were then obliged to be suspended, and the effects of the evil counteracted by the use of opiates. The progress of the disease was thus accelerated, and the slow and insidious steps of it hurried on at a rapid pace.

In other cases, patients have died apoplectic, been seized with giddiness immediately after inhaling the supposed salu-

tary fumes, and dropped down to the confusion of the pneumatist, and to the unexpected disappointmenf of their friends. Hence it is perfectly clear, that nature intended that for the purposes of life, the gases should only be inhaled in a certain proportion, as they exist in atmospheric air, that till the function of inspiration is more fully understood, no change in the component parts of this fluid can take place without serious injury. Nay, in almost all situations, it is found that the quantity of oxygen contained in atmospheric air, is much the same, and that the cure of diseases is more connected with its degree of temperature, than with any change in its constitution. Hence, we consider pneumatic medicine as a dangerous and bold innovation, and constituting a species of empiricism of a more injurious tendency than any of the nostrums of the Patent Warehouse, for rapid are the strides from its use to "that bourne from whence no traveller returns."

REGULAR PRACTICE.

I. MEDICINE.

GENERAL PRINCIPLE OF PATHOLOGY.

It is an axiom laid down, which applies very generally, that no two actions can take place in the same constitution, and in the same part, at one and the same time. The exceptions to this rule are few, and on this principle may be said to proceed the cure of the greater number of diseases. The great point is to find out the proper means of exciting that action which is to suspend or overcome the diseased one. Of modern remedies, mercury has gained a decided preference; and in fevers and inflammations of a chronic nature, which affect the larger organs, as well as in a variety of other complaints, it is the only one to be trusted to; but the use

of this remedy, like every other powerful means, may be carried too far. The adapting the means to the end, is the great criterion of judgment in the practitioner, and the use and extent of any remedy is to be regulated by this rule alone. Hence failure and disappointment will accompany the same means with one, which will be attended with complete success in the hands of another. The practice of public institutions to an observer demonstrates this every day.

On the same principle of producing a *new* action, may be explained the operation of *cold affusion* in fevers, by counteracting the morbid one, in consequence of a superior stimulus, and also of *emetics*, which, independent of the mere evacuation, exert a powerful and extensive influence on the system; suspending the morbid action, and opening, particularly from this extensive influence, the excretion by the skin.

The effect of large blood-letting must proceed on a similar ground, by the sudden depletion giving a suspension to the violence of the morbid excitement. Hence copious bleeding, and suddenly drawn by a large orifice, are the points to ensure its success in acute diseases.

VACCINATION.

The triumph of Vaccination is much completed since our last number by the munificent establishment of a National Institution, under the direction of the two Medical Colleges of the Metropolis. The doubts which at present agitate the public mind, it is to be hoped, will be thus entirely removed. But these doubts, which preclude the general reception of this discovery in Britain, seem not to have extended their influence to remoter regions. In a former number we stated the progress of vaccination in Ceylon, in 1802, from the report of Mr. Christie, chief medical superintendant of that settlement. A report is now published by the same gentleman for 1807, in the official Gazette of that government, which we here insert. It is an "Abstract," he

remarks, " of the number of persons vaccinated in Ceylon in 1807; which will shew the successful progress we have made in disseminating the practice of vaccination, throughout the island, during last year.

"The number inoculated has been considerably greater than in any former year, particularly amongst the Malabar inhabitants of the Trincomallie and Jaffna districts, who, in the first instance, seemed less disposed to adopt the practice than the Cingalese, in the southwest part of the island; but a conviction of the perfect innocence of vaccination, and its preventive influence against small-pox, is now very general amongst all ranks throughout the British possessions on Ceylon, though from the unfrequent occurrence of small-pox, the natives, in many places, shew more indifference and apathy about shielding themselves from that malady.

" We do not, however, find any difficulty in keeping up the disease at the respective stations, but the vaccinators are now frequently obliged to visit the different villages, and urge the inhabitants to avail themselves of the benefits of inoculation; whereas, on the first introduction of the Cow-pox in 1802, when the Small-pox raged at Colombo, the natives of their own accord flocked in crowds to the inoculators, and expressed the greatest anxiety to be immediately vaccinated.

" The small-pox was prevalent at Trincomallie in January last, and from thence found its way to Jaffna, but has since been banished from both places, by the beneficial influence of Vaccination, which has been very extensively practised in these districts during the last year. The very successful propagation of the disease at these places may, I think, be attributed to the alarm created by the appearance of small-pox, conjoined with the beneficial effects of a Government Advertisement on the subject, circulated in the Malabar language, to which must be added, the extreme assiduity of the Collectors, in promoting with their influence a diffusion of the practice, and the very meritorious exertions of the Medi-

calSuperintendants and Vaccinators in the discharge of their duty.

" Previous to the introduction of cow-pox in 1802, the small-pox scarcely ever failed to visit us at Colombo during the prevalence of the southwest monsoons, when the port was open, and generally carried off a great proportion of the inhabitants, but of late we have comparatively suffered very little from that disease. It is true, that since May 1805, we have had occasional cases of small-pox in the Pettah of this place, which, in some instances, there is reason to believe, was introduced from the Candian Country; but the contagion never spread as formerly, and is at present extinct, not only in the Colombo district, but throughout the whole of the British possessions on Ceylon, agreeably to the most certain information I have been enabled to procure, from the respective Vaccinators, who are directed to report on this subject.

" From a Review of the Registers of Vaccination, I find that the total number of patients reported to me as having regularly passed through the disease, up to the end of 1806,— was 54,958, which, with 21,270, included in the Abstract for last year, will make a total of 76,828 persons; a large proportion of the limited population of these settlements.

" It would be absurd to expect that in such an extended practice, often conducted by persons not regularly educated to the profession of medicine, some failures and mistakes may not have taken place; but I can with truth affirm, that in the neighbourhood of Colombo, where small-pox has most frequently occurred, I have been at great pains to trace to its source, any report prejudicial to vaccination, and to investigate the circumstances of every case of supposed failure; and in no one instance have I found that a person who had been vaccinated, and declared secure by the Inoculator, ever afterwards had small-pox.

" In a former letter I had occasion to mention, for the information of your Medical readers, the Vaccine disease hav-

ing been communicated to a boy affected with leprosy; and from a melancholy instance which has since occurred, it is certain that persons affected with that disease, in the most malignant form, are not exempt from the contagion of small-pox.

"Clara de Silva, a woman, aged about 50 years, who had been confined in the Lepers Hospital since May 1775, with leprosy in the worst form, having been exposed to variolous contagion, sickened about the 1st of August, 1806, and died on the 11th of that month, with confluent small-pox.—On the appearance of Small-pox in the neighbourhood of the Lepers Hospital in May, 1806, vaccination was practised amongst the patients of that Institution, but this old woman declared, she had had the small-pox when a child, and refused to be inoculated.

"The fact may be useful, by shewing that no disease of the skin, however virulent, gives perfect security against small-pox; and that in the event of an epidemic contagion, no consideration of that nature ought to prevent us from attempting to shield the constitution against its influence, by vaccination.

Abstract of the Number of Patients inoculated in the different Districts on Ceylon, during the Year 1807.

Superintendants.	Districts.	Vaccinators.	No.
A. High, Esq.	Caltura	F. W. De Hoedt	2684
	Columbo	H. W. Schimmelkettle	1610
	Negombo	M. Mack	1153
	Chelaw	J. H. Vansauden	240
	Calpentio	B. H. Toussaint	799
	Putlam	J. L. Janzen	860
J. A. Stutzer, Esq.	Manar	H. Mattheis	1364
	Jaffna	J. C. Keegel	6083
	Mullativo	J. C. De Hoedt	247
J. Bath, Esq.	Trincomalie	N. Claasz, & F. Van Sanden	2016
	Batticaloe	J. W. Seyp	1070
J. Adams, Esq. and M. Reynolds, Esq.	Hanbantotte	C. Hopman	236
	Tangalle	C. Hersse	1556
	Matura	J. W. Pietersa	1277
	Galle	J. Seybrands	675

HYDROPHOBIA.

HYDROPHOBIA still continues the dreaded subject of the day, and prevention seems very properly to engage medical investigation as much as its actual cure. "As a means of prevention," Dr. Wood of Newcastle observes, "the method of dilution, pointed out by Dr. Haygarth, deserves our first attention; he recommends to wipe the wound with a dry cloth, so as to absorb all moisture, then abundantly, and with the most persevering attention, to wash the part with water quite cold for several hours. After this, warm water is to be used, to produce a flow of blood, which is to be poured from the spout of a tea-kettle held up at a considerable distance. The ablution should be accomplished with great diligence, and without delay. In a bad wound with much laceration, to this ablution, cupping and syringing are to be added; and in addition to this, it has been proposed that the wound should be enlarged, and even excision of the lacerated parts, when circumstances will admit of it. Dr. Percival has proposed, as a farther security, that the parts after ablution may be washed with the gastric liquor of an animal recently killed, or with the juice of rennet; next to ablution, *the keeping up a free discharge from the wound for a great length of time, seems to be of the greatest importance.* This may be effected by repeated blistering, or by escharotics. It may here be remarked, that all trials to arrest the poison by means of caustics, gunpowder, and the like, have invariably failed; but after ablution their use to keep the wound open may be of service. Ligatures above and below the wounded part, where they can be applied, have been recommended during the ablution, by Dr. Percival. Apparently, simple means produce very salutary effects; perhaps, after the ablution recommended by Dr. Haygarth, the pouring of warm cow's milk from a tea-kettle in the same manner upon the wound may be of use; we know that milk has the power of counteracting the effects of some poisons received into the stomach,

Such are the means of prevention most likely to succeed: we now come to the treatment of the disease when such have not been used, or shall unfortunately fail. And here I may observe, that I was of late more immediately led to the consideration of the cure of this disease by seeing Dr. Arnold's very interesting case of Hannah Springthorpe, which was treated by stimulants and antispasmodics, and terminated favourably. From this case and some others, it appears that our reliance ought to be entirely on such remedies, when the symptoms of the disease appear. Opium, musk, cuprum ammoniacum, calcined zinc, with the cold bath, have been particularly named as most adapted to the disease. Doctor Percival thinks that the digitalis, from its quick action and sedative powers, seems to promise to be of service in this disease. Dr. Shadwell's case of John Cumbus, a drover, seems to shew, that the internal and external use of oil is of considerable service in allaying the irritability and spasms. From our knowledge of its component parts, it promises to be useful to answer this indication; but instead of frictions, perhaps a requent immersion of the whole body in oil of a temperature a little above that of the body, might be more efficacious. The warm bath has always given momentary relief, which I attribute to the stimulus of heat; but the effect of this stimulus, applied through the medium of water, may not be so permanent as when applied through the medium of oil; besides the oil itself may act as a stimulant, and its effects may be also permanent. The internal use of oil should also be had recourse to; and when its use in this way is prevented by the spasmodic affection of the muscles of deglutition, perhaps it may be conveyed into the stomach by the same means as have been recommended for throwing food into the stomach in a paralysis of those muscles.

"The benefit experienced from the use of the spirit of caustic volatile alkali, in preventing the bad effects of the bite of a species of viper, induces Dr. Bardsley to think, that this

medicine may be of use in this disease. We cannot have too large a magazine of powerful stimulants to resort to in such a state of the body, as a succession is required in a rapid manner to produce any sensible effect in so short a period as commonly is allowed for their action; perhaps the *Peruvian balsam* may be no trifling vehicle for the *volatile alkali*. Opium, that anchor of all our hopes in many diseases, is to be chiefly depended on in this disease. The late Mr. Hill used to give it with his medicine; but as a preventive, it cannot be of any use. I remember that Dr. Black, in his lectures, always mentioned his suspicion of arsenic forming a part of Mr. H.'s remedies. From the powerful tonic effect of the *mineral solution*, it appears adapted to every indication in the cure of convulsions; I have stopped long established epileptic paroxysms by its powers. It has not been mentioned by any author I have read on this disease.

"To all the means of cure in Hydrophobia may be added topical applications to the throat, which in one instance, it seems, was of the greatest use."

This case occurred to the late Dr. William Turnbull, physician to the Eastern Dispensary; and the particulars of it are worthy of narrating here.

"Robert Dixon, a weaver, of Norham Mains, near Berwick, was bitten on the leg by a mad dog, 30th July, 1761. The symptoms of Hydrophobia soon appeared; pain gradually ascended from the wound to the knee, thigh, stomach, with sickness and oppression at the breast. These sensations daily increased, and were followed by convulsions and strictures in the throat, which threatened suffocation, particularly when water was presented to him. To the wounded part a caustic was applied, and it was kept open by blistering, and stimulating ointment, *from the first*, until some time after all the symptoms were entirely gone. The leg was often bathed with warm oil. A tea-spoonful of a tonic electuary was given four times a-day, consisting of bark, valerian, musk,

and camphor; opium was also given in large doses, to assuage the irritation and spasms. To the throat was applied a plaister, consisting of opium, frankincense, camphor, asafœtida, and gum galbanum. The man, after his recovery, declared that he felt more relief from the plaister than any other thing: he said that it gave a pleasant warmth to his throat, and from thence its effects followed in the same direction to the wound as the pain had ascended from it."

CUTANEOUS DISEASES

Are a numerous and obscure class, with the different species and varying appearances of which we are not fully acquainted. A species of porrigo affecting the scalp, in the form of red circular patches, is thus described by Mr. White of Bath.

"The disorder is an eruption which affects the heads of children, particularly in boarding-schools; and from its circular figure, and spreading nature, it has generally, though not with strict propriety, obtained the name of ring-worm, since that disease is usually *vesicular*, appears on different parts of the body, and is not contagious; but the disease I mean to describe, chiefly affects the head, and is often communicated to the hands and arms of parents, or other persons who have had the care of children labouring under the complaint.

"The disease commences with a small, red, circular patch, and slight elevation of the cuticle, on different parts of the head, attended with itching. As the patch expands, the centre of it gradually assumes the natural colour of the skin, still however remaining scaly. A red circular line at the circumference of the patch, marks the termination of diseased action; and as long as that red line remains, the disorder continues to spread, and the hair falls off; which circumstance commonly leads to the discovery of the complaint. Sometimes small papulæ, or very minute pustules appear in the vicinity of the patches. This species of scaly eruption, for the most part, proves very obstinate, sometimes continuing

several months; and even after it appears checked from spreading, it is a long time before the scaliness is removed, and the cuticle assumes its natural appearance again. It is not attended with any constitutional affection, but sometimes children are observed to look rather paler than usual. The disorder is evidently contagious, because it is speedily communicated to children who happen to use the same comb, hat, &c. belonging to those who are affected with it. Whether it be communicable merely from sleeping together, I cannot ascertain; but from the inquiries which I have made respecting it, I am inclined to think it is not.

"Notwithstanding the disorder is, at first, somewhat different from the porrigo, yet if through neglect the scales be permitted to accumulate to a considerable thickness, pustules and a scab will at length be formed. I have at present under my care, a case of porrigo, accompanied with small circular patches of scales on different parts of the body. These entirely disappeared on the administration of the mineral solution; but this medicine has not materially benefited the head, for though the scabs are removed, the cuticle remains red and scaly.

"Although this species of porrigo above described may appear of a trifling nature, yet I never met with any cutaneous complaint more perplexing, and which proves a greater source of uneasiness to parents, and particularly to persons who have the care of youth, as it spreads with great rapidity when it makes its appearance in schools, and is very difficult to manage. With regard to the mode of treatment, a variety of applications have been used, and frequeutly to very little purpose; for, however carefully the scales are washed off, they very soon appeared again. Mercury in different forms, nitric acid, solutions of zinc, and of arsenic, &c. &c. have been alternately tried. In some cases, I have known an alkaline lotion, in the form of the lotio saponacea of the old Edinburgh Dispensatory, succeed better than any other appli-

cation. I do not know that internal medicines are of any service, but sometimes I have given small doses of calomel combined with natron. Unless the disease be very slight, the head is always shaved, and the shaving repeated once a week as long as it appears necessary. In order to prevent its spreading, each child is directed to have a separate comb, towel, &c. and they are likewise strictly prohibited from wearing each others hats, caps, &c."

LETTER OF DR. J. ARCHER, TO THE HONOURABLE SAMUEL MITCHELL ON VACCINATION AS A REMEDY IN HOOPING-COUGH.

Harford County, Maryland, Nov. 15, 1808.

Dear Sir—You may recollect that about three or four years ago, I mentioned to you my opinion, that vaccination would cure the *tuffis convulsiva*; that I had made one experiment; and that it succeeded fully to my expectations. I mentioned the case to several physicians, and requested the making a trial of its effects when they should have any patients with hooping cough. The beneficial effects of vaccination above-mentioned determined me, in every instance that occurred of the hooping-cough, to vaccinate. I therefore have vaccinated six or seven patients who had the hooping-cough, and in every case, it has succeeded in curing this most distressing disease.

The hooping-cough does not come to its height in less than six weeks from its commencement, and then, when a favourable termination is expected, the declension of the disease is gradual; and does not terminate in less than six weeks more. To arrest this afflicting disorder in its progress, I would recommend vaccination in the second or third week of the hooping-cough; that is, when the symptoms of the hooping-cough are fully ascertained, then to vaccinate. Should the convulsive cough be violent, I would immediately vaccinate, being well assured that the distressing symptoms

of the hooping cough are checked by the vaccine disease. The termination of the vaccine disease will be the termination of the hooping cough: that is, as soon as the vaccinated part loses the efflorescence, and the scab begins to dry, and becomes of a blackish or brownish colour, there will then be an evident change in the hooping-cough for the better, and the severe symptoms will cease.

"Thus two of the formidable distempers, to which the human race is liable, are arrested, the small-pox and hooping cough; the former prevented and the latter cured.

"I am, with respect and esteem,

"Your fellow citizen,

"JOHN ARCHER."

CASE OF HYDROPHOBIA, BY DR. NISBET, AND MR. MORRIS, MEMBER OF THE ROYAL COLLEGE OF SURGEONS, LONDON.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—In a disease of late so frequent in its occurrence, and so ineffectual in its treatment, every thing that can add to our acquaintance with its history is certainly worthy of attention; and in that view the following case is requested to be inserted in your useful work, as affording a mite to the histories already given by so many eminent practitioners on this obscure and interesting subject.

Isidore Le Mercier, a Frenchman, aged 25, residing in Bedfordbury, was by accident, in the month of August last, attacked furiously by a dog in the neighbourhood of Tottenham-court-road. The animal bit the forefinger of the left hand, and likewise the wrist. In the height of his resentment, and to prevent the enraged animal from injuring him farther, he grasped the dog forcibly by the throat, till he strangled him. The wounds he had received were superficial. They healed up in a day or two, and he thought no more of the matter; so that the influence or impression on the mind was no way concerned in the production

of the future symptoms; a circumstance so much dwelt upon by the opposers of the specific nature of this disease. In the month of January last, five months from the time of the accident, he was seized with appearances resembling a common cold. The symptom he chiefly complained of was an inability of swallowing, or the feeling of something as if choaking him when he attempted to get any thing down. These symptoms continued, for two days, before they assumed the last and aggravated form of the disease. On Sunday morning about four o'clock, slight convulsions and spasms of the chest first attacked him. Their frequent repetition alarmed him, and about eight o'clock the next morning, Dr. Nisbet was desired to see him by a friend, who seemed rather to make light of the alarm which the unhappy man felt for his situation. On seeing him, I was particularly struck, though I had never witnessed the disease before, with the peculiar *wild anxious* look which the patient's countenance depicted—it was an expression of horror and dread of his situation, which I can faintly describe, and which, I immediately decided, could not be connected with a common case of spasm. The fondness for life was expressed with the most anxious and restless solicitude for his recovery, and with the seeming dread observed to receive an unfavourable opinion. Every part of his behaviour, which was most restless and unsettled, shewed a marked and uncommon suspicion of every person around him. The opening of the chamber, the smallest movement in the room, gave the most unspeakable distress. At this time I desired him to take a draught which stood by his bed-side, and which Mr. Morris had sent. On presenting it in a cup, I was astonished he could not bear it to come near him. Something, he said, choaked him, and he begged I would take it away. My opinion of the case was now settled; and as soon as I had an opportunity of meeting Mr. Morris, I stated my conviction of the disease, in which he readily acquiesced, and the usual

plan of opiates in liberal doses, as a mere palliation of symptoms, was resorted to, not seeing, indeed, what else could be done. Particular engagements prevented me from again visiting the patient that day, and next morning, about eight o'clock, I was sent for along with Mr. Morris; but by the time we had arrived, the unhappy patient had breathed his last. On inquiring into the subsequent progress of the disease, we were informed that the whole of the previous night the convulsions had been most violent, and repeated almost every five minutes, requiring no less than five persons to command him, that the patient continued sensible during the intervals, and lost none of his recollection till within two hours of his dissolution. At one time he expressed himself with the greatest anxiety for life; at other times he seemed to fall into a state of despondency; but during the whole of his illness he never breathed a hint of the cause of his malady, or that he had been accidentally bitten. It was only from the persons in the house that we learned, after his death, the particulars of it. Permission was not given to examine the body, which is to be regretted.

I had never, in a long experience of medical practice, seen a case of hydrophobia before; and the symptoms therefore in this case made a greater impression on my mind.

After the very accurate histories given to the public by Dr. Powel, Dr. Pinckard, and others, I could have no hesitation in deciding what it was; and I think no person, who once sees such a case, can ever be mistaken in it.

The strong pathognomic symptoms are a wild anxiety depicted in every feature of the countenance; a perpetual increasing restlessness and agitation; a peculiar suspicion and dread displayed by the patient respecting every thing about him, as well as of his attendants.

The opening or shutting of the door alarms him; every new face creates distrust and dismay. His feelings are rankled even by a breath of air blowing upon him;

and such was the unhappy state of the patient I describe, that he caused even the windows of the room to be closed up lest the air should touch him. The horror of liquids is therefore but one circumstance. The same horror pervades every thing that makes an impression in this state of general and local morbid irritability, and especially in regard to those things which require an action of the organs of deglutition. From what I have seen, then, I am ready to conclude that this disease of hydrophobia not only exists, but is *peculiar* in its *character*, *specific* in its *cause*, and requiring on this account a treatment *equally* specific, if we can once acquire a knowledge of it. The line is pointed out by the interference of the legislature, and it is to be hoped, for the sake of suffering humanity, it may be an opening to the necessary discoveries.

If the above can lead to any farther information on the history of this obscure disease, my object is attained.

I am, Gentlemen,

Your obedient Servant,

London, Feb. 10, 1809. WM. NISBET.

MEDICAL REFORM, EDINBURGH.

From a correspondent at Edinburgh we learn with regret, some dissentions exist among the Professors and the Students; in consequence of the former having doubled the graduation fees. Respecting the propriety of this measure, it does not fall to our province to applaud or censure; but as we are on the subject, we shall with due deference express our ideas on the points at issue. As friends to liberal science, we confess, without some very cogent reasons are assigned for this augmentation of fees, we are inimical to the measure: inasmuch as we conceive these superior tribunals are not erected for private advantage but public good; and where an individual is found worthy of the academic honours, that honour we would have conferred gratuitously: the resident student most assuredly should not be too much oppressed; in his favour the fees ought to be moderate; as one of the children of the

Alma-Mater, some distinction ought to be shewn him, otherwise you place him on the level with the Empiric, and degrade the medical character: many a scientific genius will be prevented entering the medical profession, if they are thus to be fettered with unnecessary fees. Zealous as we are for the rights of corporated bodies, we conceive in this instance they exercise a power to which no legitimate claim is attached, and think the fair principles of equity somewhat distorted. The period is not long passed, since the expenses of a Medical Education at Edinburgh were by no means high; three guineas a session to each professor was the fee, three guineas to the infirmary, and three more to the clinical lectures. That universities should be tenacious of their academic honours no one will doubt, and it is with pleasure we announce from our own knowledge, that the principals of the Scotch college have come to a resolution not to grant diplomas to any one who has not had a classical medical education. Sir A. Bannerman in this has particularly distinguished himself, and merits the applause of the medical world: this will shut the door upon the Empiric; for the privileges of a diploma once granted, are unrestricted, the exercise of the right of that diploma being secured by repeated acts of parliaments, and which the union of Scotland and Ireland secured to each kingdom.

We now give our correspondent's letter, and trust their schism will be succeeded by a perfect harmony.

"*University of Edinburgh, Feb.* 12, 1809.

"*Gentlemen*—I TAKE the liberty through the medium of your Spectator of making a few observations on the professors of this university, more particularly, with regard to a law lately passed by them doubling the fee for graduation. I will not at present take up your time, in considering the propriety of large sums being given to the professors by students who have already paid them dearly for the knowledge they have acquired, in order to obtain this testimo-

nial of their abilities. It must be evident to every one that no more at least ought to be given than will compensate for their trouble, and for this the former fee, even by the professors themselves, is not said to have been insufficient; indeed it is hardly possible to conceive that men receiving 1000 and 1200 guineas for a quarter's course of lectures could complain. Still, however, they have for some years wished that their income should be greater, and this they think they have accomplished by doubling the graduation fee.

" It is curious to observe on what grounds they have done this; they are ashamed to confess their avarice; they know they could not complain of insufficient remuneration for their trouble, but they wished to pass it off on the plea of increasing the respectability of the profession. Let us see then the conduct of these very men on another occasion.

" In February, 1807, the Royal College of Physicians, of which the professors of the University are Editors, Censors, &c. &c. returned an answer to Dr. Harrison's letter concerning the Medical Reform, from which I extract the following—

' Whatever regulation be enacted, they are of opinion, that these should have chiefly in view the benefit of the community at large and not merely the emolument or respectability of the Medical Profession.

' It appears to them, that several parts of the proposed plan may tend rather to diminish the number of those who might hereafter engage in the medical profession, than to promote the welfare of the public, by increasing the facility and the certainty with which they may obtain proper advice and assistance in sickness or in bodily injuries.'

" Again,

' Whatever regulations are enacted, it would be unjust that these should affect practitioners already engaged in business, or students who have entered on an education for any of the branches of the Medical profession.'

"Such was the opinion of these men in 1807, but in April 1808, they pass a law, having in view merely their own emolument! Their speeches concerning the tax of five shillings on each student can now be perfectly understood. If the law were intended to increase the respectability of a degree, why did they not make it as public as possible?

"The professors will not however long enjoy the pecuniary advantages arising from this law, for although several will rather pay a double sum than at the end of their studies remove to another university, that will not long be the case. Already some students have gone to a neighbouring university, and others have been kept merely by the idea that so unjust a law would not be persevered in.

"Let the magistrates of Edinburgh also consider whether 80,000*l.* or 100,000*l.* circulated annually in their city be such a trifle as to be endangered by the private emolument of a few men. In my next, I shall give some farther particulars of liberality in certain of the professors to the students.

"I am, Gentlemen, with the highest respect,

"A PUPIL OF THE EDINBURGH SCHOOL.

"*P. S.* I have just learned that the associated students intend to publish the whole of their proceedings, as soon as the answer has been returned to a petition, which has been for about two months before the magistrates, the patrons of the university."

To the Editors of The Medical and Surgical Spectator.

Gentlemen—Whilst I cannot but be gratified by the handsome terms in which your correspondent M. has noticed my *Reports on Cancer*, in the last number of your Journal, I think he might have observed, that I have, in more passages than one, sufficiently declared my own opinion, how the practice which it is my object to establish is to be reconciled to our ideas of a natural and healthy state of existence. I apprehend, not that pure water is necessary to a perfect

state of health, but that, under a diet, strictly conformable to the nature of man, he would not experience a necessity for drinking: in a word, that, naturally, man is not a drinking animal. In p. 3 of the *Reports*, I have thus expressed myself:—" I have found that one of the strongest objections in the minds of many sensible and well informed persons, against my proposal of introducing the use of pure distilled water in the treatment of chronic diseases, has been that the practice seems wholly unnatural. If they can once bring themselves to suspect, that the practice of all drinking whatever is equally unnatural, a strong prejudice will be removed, and they will more readily comprehend, that if an unnatural habit be at all indulged, especial care should be taken to prevent it from being likewise a nervous one." Some other passages to the same purport might be produced; and if they made but a slight impression upon your correspondent, it is, I presume, to be attributed to the rapidity of reading, and to his attention being fixed on more prominent parts of the argument.

Nothing can be more striking to a contemplative mind, than the perfect adaptation of the organs of animals to their habitudes and necessities. Examples of this are so obvious, that it is almost superfluous to cite them. We may remark it in the gizzard of the fowl, in the webbed foot of aquatic birds, or the light and hollow bones of those that fly. Can we look at the formation of the heron, and not be convinced that nature has adapted him in every part of his structure to his peculiar occupation of wading into shallow streams, and catching fish? But if I survey in the most superficial manner the structure of man, I perceive that drinking is an action of which he appears naturally to be hardly capable. Not a particle of liquid can get into his lips, that is not conveyed thither by some artifice. His upright form, and the flatness of his mouth are in direct opposition to the action of drinking. It may be said that he is utterly unprovided by nature with any organ suited for this purpose. In this respect man is

more destitute than the sheep, who can drink without difficulty; though he too is not by nature a drinking animal; he never drinks when he can procure abundance of succulent food; and almost all his diseases may be readily traced to the operation of water. It is true that a man can drink by stooping down to the stream like the animals; but this mode is almost as much a constraint upon him as walking upon his head instead of his feet.

It may be thought that the feeblest exertion of intellect would teach him to surmount this difficulty. But slight as it is, it includes a process of reasoning, of which animals appear incapable; and all the accounts of children, who have been discovered in the forests, living wild upon what they could collect, inform us that the human animal is in this condition inferior in intelligence to the quadruped. It is highly probable that those beings really did not drink at all. This hypothesis takes away all the difficulty which is supposed to attach to the idea, that the streams which are destined to the service both of man and brute are impregnated with poisonous matter; since it is evident, that what acts as a poison upon the human race, may have no such effect upon animals which are formed by nature for drinking. At the same time I must say, that, it appears to me that all our domestic animals are injured by drinking, much in the same way that mankind is: and I believe that if they had always plenty of fresh succulent food, they would rarely drink at all, and that very sparingly. The effect of common water is extremely evident upon small birds in a cage. The woodlark is a bird of so delicate a nature, that it can hardly be bred up in a cage. A lady of my acquaintance had often attempted to raise them without success. But lately, by distilling her bird's water, she has succeeded perfectly.

I am, Gentlemen, your obedient Servant,

WM. LAMBE.

2, *King's Road, Bedford Row,*
February 20, 1809.

Reports on the Effects of a Peculiar Regimen on Scirrhous Tumours and Cancerous Ulcers. By William Lambe, M. D. Fellow of the Royal College of Physicians.—pp. 190, 8vo. 5s. boards.

(Concluded from p. 137.)

In our continuation of this Review, we have selected this case as the most prominent among them for the elucidation of the author's practice, as well as collecting in a brief point of view, all the fruit of his as yet limited experiment, and with it we close our account of this well written book.

"Case ix.—A widow lady, aged 46, had perceived for some years an uneasiness in the right breast, and in 1802, she applied for surgical assistance for a small lump, which had appeared just above the nipple. It was attended with some pain, but neither at this time, nor since, has that been very severe. The tumour was treated with local applications, (the *tinctura ferri ammoniacalis* mixed with *spiritus vinosus tenuior*) which seemed to contract or flatten the tumour, acting most probably on the parts surrounding the substance of the tumour. During the year 1805, the tumour increased, and in February 1806, a small hole had formed in the skin, which had become discoloured, and there was a fetid matter discharged from it. At this time the regimen I have so often spoken of, was recommended to her, but it was not adopted; and I know not what occurred from this time till the beginning of June 1807, except that the ulcer never closed, but continued to discharge a serous fetid matter; once the whole inflamed, and a number of oval vesicles came out; afterwards there was a discharge of a cream-coloured matter. After this the ulcer contracted greatly; it, however, never closed, but enlarged by the gradual destruction of its margin.

"In June 1807, I saw the case. The ulcer was still no larger than a half-crown piece; there was some scirrhous matter around it, but it did not occupy the whole gland; there was a sinus of some depth at the upper part of the

ulcer, and some fungus round the margin. Though the greater part of the breast was occupied by the ulcer and surrounding scirrhus, yet the gland being naturally small, the whole disease was also proportionably small. The general health too was very good; that is to say, for a person with such a disease; for I have been lately informed, that her health has been delicate many years. However, there was neither muscular debility, emaciation, nor any other appearance, threatening a speedy termination of the disease.

"Here then, at length, a perfectly fair opportunity (which I had long and vainly solicited from the benevolence of surgeons) was obtained of ascertaining the effects of this regimen on the ulcerated Cancer; for the lady declared her readiness to follow my advice; and she has done so most rigorously. The result has been such as, I hope, will be perfectly satisfactory to the most scrupulous, but sincere inquirer, after the truth. It may be described in a very few words.

"She left off the animal food gradually, first taking a little every second day, and, after three or four months, using it only once a-week: at present she uses none; nor has she perceived any inconvenience from the change, but has found herself cooler and more easy. Her strength is now quite as good as it was at the first.

"For a twelvemonth there was little change in the diseased part; no fresh thickening took place as long as the scirrhus, which had been formed, remained; but once in the course of the year, the same train of circumstances took place, as before the adoption of the regimen; viz. the part inflamed, a quantity of oblong vesicles sloughed out, and afterwards a cream-coloured fluid was discharged. The ulcer then contracted a good deal, but it still continued open; so that at the end of the year, it was nearly the same magnitude as it had been at first. When all the scirrhous matter had sloughed, the edges all around again thickened. About the middle of June 1808, she began to feel more pain than usual; some

hæmr hage took place; this was soon followed by a considerable degree of inflammation, attended with more pain, and a much greater discharge of watery matter; the scirrhous edges then began to soften and come gradually away in pieces of about an inch long, and as thick as a quill. In consequence of this, the cavity of the ulcer was greatly increased in magnitude; and the discharge again assumed the colour and consistence of cream. This process was attended with much fetor. The discharge gradually abated, the ulcer contracted, and now it perfectly and completely closed up, the surrounding skin being brought down to the base of the ulcer, and covering it perfectly. So entirely is the ulcer obliterated, that, except for some relics of the disease, about to be related, it would be impossible by mere inspection to determine the precise situation, which it had occupied.

"The relics of the disease are these; a small quantity of scirrhous and discoloured substance remains, which occupies the upper parts of the original seat of the breast. It is quite loose, and unconnected with the parts beneath. This, there being no ulcer, must be regarded to be small occult Cancer. Immediately beneath this, is a ridge of an inch, perhaps, in breadth, and half as high at its summit, running downwards, and rather backwards, with a small curvature, upon the side. Its whole length is between three and four inches: it is firmly bound to the side at its top; at its lower extremity it tapers, is much smaller and looser, and it is finally lost in the skin. Along its whole length runs a deep oblique furrow, making it, in fact, two ridges placed close along side each other; the basis of the furrow has no cuticular covering, so that there is from it as much discharge as may moisten a piece of lint placed in it. From its position, I conclude that the upper part of this ridge was an adhesion of the gland to the side. It swelled, and assumed its present form in July, either when, or immediately after that the remaining part of the gland had sloughed away. The lower part is, of course, much

below the situation of the gland, and shews, in a very curious manner, what was the whole extent of the contaminated part. Besides these remains of the disease connected immediately with the diseased gland, the skin is a little rough, and tuberculated near the sternum.

"This adhesion seems to have been formed very early in the disease. As far back as 1802, when first examined by a surgeon, the gland "was perfectly moveable, except a very slight attachment just beneath the nipple, and by this the nipple was rather drawn a little obliquely downwards." I use the words of her surgeon, in the country, taken from his correspondence on her case.

"Since this time, the disease has been stationary and quite free from pain. I saw it in October, 1808, and have described it as it then appeared."

A Practical Dictionary of Domestic Medicine; comprising the latest Discoveries relative to the Causes, Treatment, and Prevention of Diseases. By Richard Reece, M.D. Member of the Royal College of Surgeons in London, &c. &c. Royal 8vo.

Popular Medicine has for some years past become the rage of the day, and we are doubtful whether more good or injury is apt to arise from this species of writing. We admit there are circumstances in which, to a certain extent, it may prove beneficial to society. These circumstances are in cases of sudden attacks of disease, or accidents, where medical aid is placed at a distance. A person on the spot, even with a superficial knowledge, may, in these particular instances, apply it with much advantage to society. But the progress of science induces every one now to read, and has given a turn for investigation on subjects which do not belong to them. The random knowledge thus acquired is apt to be carried too far; and on a subject so essential to the interests

of life, may lead to consequences often dangerous, and not unfrequently fatal. The maxim of Pope applies here with peculiar energy:

> " *Drink deep*, or taste not the Piërian spring;—
> " A little learning is a dang'rous thing."

At the same time it must be allowed that those will be more ready to attend to rules of living, and those instructions necessary to the preservation of health, who have traced with a careful attention the injuries arising from a neglect of them, than others who are ignorant, and an idea of remote advice will not make the same impression. Many of the diseases that assail human nature have their origin more in the follies and vices of mankind than any other cause; and to point out the fatality of these may be of service both in a medical and moral point of view. Such works, therefore, as consist chiefly of cautions, and treat of the preventive part of the subject, we consider more important than systems of practice. The chief fault of systems of practice is, that their readers attempt to become critics on the regular practitioner, and often form a judgment of his conduct and professional character on very lame grounds, suited to their own limited acquaintance with the subject. This is the fault of Tissot and Buchan, and of many other writers of great name. The present work before us sets out on a different principle. Instead of being intended merely for the people at large, it is directed for a class of the community who stand on a different footing. These are the clergy, and practitioners of medicine, who, perhaps, have not had all the benefits of an extended education. The first being men of science, whose minds are naturally turned to investigation and research, will certainly receive more benefit from such works than any other persons. They are displayed also through different parts of the country, where medical aid is often difficult to be obtained, and they possess an influence on the community, from their sphere of life, which makes their sphere of life be attended to and re-

spected. A knowledge of popular medicine to such persons is of value, and they will apply it with a degree of judgment which cannot be expected in other sorts of readers. Their liberality also will lead them to give up their knowledge to the regular profession where they attend, and thus they will never err on the head of presumption. Such men will prove valuable seconds to the practitioner, and be the means of his precepts being more strictly enforced. The intention of the author, in directing his publication to this body in particular, we consider as highly praiseworthy. But there are subjects in this work which do not fall under the general censure we have attached to popular medicine. These are what respect medical jurisprudence. Questions of life and death are the too frequent subjects of investigation, and it is proper that every one who is placed in the delicate situation of deciding the fate of his fellow-creature should be able, from his own judgment, to form some opinion, and not trust entirely to professional evidence. We had occasion to state this lately in the case of Miss Burns, and whoever peruses the detail of proceedings in that trial, will agree with the justice of our remark. The arrangement of this work into the form of a dictionary we deem particularly useful. Each separate article contains in full what we wish to know on the particular points; and a reference is easier made in this form to the different subjects we desire to be acquainted with than in any other. With respect to the execution of the work itself, we observe that the author's description of diseases is not scientifically intricate nor tediously minute. The symptoms and causes of disease are briefly but perspicuously detailed, as well as the most approved plans of treatment. We remark that much attention is paid to give the pathognomic or distinguishing symptoms of each malady, which is the most useful method that could be adopted. The diseases of the mind seem not to have been omitted more than those of the body. This is a point on which medical works are often de-

fective, and which this author has properly supplied. To enable the reader to judge, we shall give an extract from the article *Passions.*

" Passions have been styled, not unaptly, by a number of authors, the gales of life; and from them, in the language of scripture, may be said to proceed the issues of good and evil. They are the source of every agreeable and of every painful feeling.

" The passions have been properly divided into two kinds, the exciting or enlivening passions, and the depressing ones. They operate on the body either suddenly; or in a slow, progressive, and gradual manner. Death has been known to be the immediate effect of the former; the latter generally produce a gradual decay and consumption. The choleric and sanguine constitutions suffer chiefly from the violent passions. The phlegmatic and melancholic ones, whose sensations are dull, fall victims to those of an opposite kind. The long continuance of one passion, by harassing out the mind, is ever apt to produce bodily disease, and one termination peculiar to the effect of the passions is also apt to arise, viz. incurable mental imbecility. The cure of mental diseases has at all times formed the most difficult task for the physician, so much so, as to render it proverbial. Thus, in the language of Shakspeare,—" who can minister to a mind diseased?" Change of objects, of impressions, and ideas, afford the only means for the guidance of reason, and argument has generally little sway. The early management of the mind, by a proper education, is the best guard against the mischievous effects of the passions at an after period. Their controul becomes then a habit with the individual, and prevents any excesses which might otherwise spring from their occasional excitement by unforeseen circumstances. Hence it may be laid down, as a leading maxim, that the controul of our passions is an indispensable requisite to the proper enjoyment of health. But in order to point out the

effects of passions more clearly, it will be necessary to consider each of them separately, and with some minuteness. The first of the passions, and one we naturally wish to begin with, is joy. It is that state of mind in which there is felt extraordinary pleasure, and in which a high degree of animation takes place. The heart becomes expanded; circulation is rendered free and vigorous; the eyes sparkle; the nerves feel a sensation connected with complaisance and mildness. Hence this state is favourable to the enjoyment, and even recovery of health, where it is languishing under diseases of a slow or rooted nature, and of a depressing kind. Of this passion, a variety of modifications or degress occur, under the names of gaiety, cheerfulness, mirth, &c. &c."

The practice in this work, it may be also remarked, is not liable to the imputation of inertness, which pervades the maxims of Buchan. It is active without being too bold, and such as may be employed with safety. The reader will be able to form his opinion of this by detailing the practice recommended in gout.

" *Treatment.*—The treatment of the gouty paroxysms must be varied according to the *age* of the patient, the *natural strength* of his constitution, and more particularly according to his *previous* habits of living. Indeed, so various are the constitutions of gouty people, that it is impossible to lay down a general or invariable plan, either for the cure of the paroxysm, or the prevention of its recurrence, which are the two indications to be attended to in its treatment. On the approach of the fit, it will, in all cases, be proper to clear the stomach and bowels by a brisk aperient medicine."

On the whole, if popular medicine is to be useful, Dr. Reece has adopted the best plan; and by enriching his work with a copious Pharmacopœia, he has added to its value, as the forms seem well adapted to the purpose intended. This being the first dictionary of popular medicine, we hope it will meet the approbation of those for whom it is intended; and

we give the author much credit for his industry in bringing forward such a work, which will not fail, from the other specimen he has already given, to meet improvement in a future edition.

FATAL CASE OF PASSION, ATTENDED BY DR. BUCHAN.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—The influence of the mind on the body is better felt than understood. That death is capable of being produced by violent affections of the mind is also admitted; but that it should happen in an instantaneous manner, as if struck down, is rather uncommon. A case occurred about ten days ago in Tottenham-court-road, in consequence of a dispute on some trifling affair, in which a female was hurried into such an extreme of passion as instantly to drop down. Dr. Buchan, of Percy-street, who related it to the writer, was called in, but life was so completely extinguished, that every attempt failed to produce the smallest symptoms of resuscitation. The patient had been in perfect health before, and the influence of the mind was so powerful, as to produce at once apoplexy in its most fatal form. From the irritability of the female system, such an effect is certainly more apt to happen with them than men, and causes of provocation should accordingly be more studiously avoided when they are concerned.

I am, Gentlemen,

Your obedient servant,

Tottenham-court-road, AN OBSERVER.

Feb. 20, 1809.

COMMUNICATION ON CUTANEOUS DISEASES, BY T. M. CATON, M. D.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—Of all diseases that occur in practice, the most perplexing are chronic eruptions of the skin, the

cause of which is obscure, and cannot be traced. These are at present too often met with: and in such cases I have followed with success a practice first pointed out by Dr. Clarke of Dominica, and first made known in this country by Dr. Garthshore. It is the oxyd formed by a combination of minerals, particularly the arseniates of antimony and mercury.

The arseniate of antimony is prepared with the acid of arsenic, and the crocus or vitrum of antimony, in the same manner, and nearly in the same proportions as the antimonium tartarisatum, only with a larger proportion of the acid arsenici filtered, crystallised, and pulverised. So powerful is this medecine, that one-twelfth of a grain is sufficient for a dose twice a day, which may be gradually increased to one-eighth in the same manner. This will be found by every one who uses it a most powerful and successful remedy. Dr. Clarke states it is an almost certain cure in leprosy. Its action is by sweat, the most certain method of producing a favourable issue in cutaneous diseases. As obstinate eruptions are alleged at present so frequently to succeed vaccination, and which have received he appellation of the *Psora Bovilla*, this medicine will be found one of great importance. In looking over Dr. Willan's extensive work on cutaneous diseases, I am surprised to find no mention made of this preparation. I am convinced it would only require a trial from the ingenious author to make him adopt it in that line of diseases which forms so much the object of his attention. I shall in a future number make some farther remarks on this subject. The present communication is meant to draw the profession to the use of this remedy.

I am, Gentlemen,

Your obedient Servant,

Feb. 23, 1809. T. M. CATON.

ON THE MEDICAL DEPARTMENT OF THE ARMY.

To the Right Hon. Sir James Pulteney, Bart. Secretary at War, &c. &c.

Sir—At a time like the present, when the exertions of the state are called forth in the most energetic manner to serve, what no Briton would perhaps wish to acknowledge, a sinking empire, it is the duty of every individual to add his mite both to amend what is really deficient in the execution of any department, and also to propose what may add to its energies, and improve the benefits it is intended to extend. Parliament has abundantly seen the necessity for this by the establishment of the Commission of Military Inquiry; in a communication to his Royal Highness the Commander in Chief, I some time ago pressed on his attention the necessity for a code of Military Medicine and Surgery, drawn from the reports of the Army Surgeons at large, so as to include the whole experience of that department. As the subject comes equally within your official notice as his Royal Highness's, and as it is one, the present defects of which cannot have escaped your observation, permit me to confirm the reasons I then urged so strongly for the improvement of this branch of the service. I can have no doubt that one like you, who serves his country without emolument, can only be actuated by the highest motives of honour and patriotism; and from a conviction that the present plan will meet the full approbation of such a character, I shall beg leave to lay before you the outline of the numerous and important topics, which a code of medical regulations, such as proposed, would embrace.

Education.—The first object which such a code should naturally consider, would be the proper education of a military practitioner, and the circumstances in his professional studies, to which he ought peculiarly to bend his special attention, with a view to his future line of practice. This being point-

ed out and settled upon, he is next to be regarded as making his *debut* in the service.

Inspection.—One of the first objects here, on which he will be frequently consulted, is the *Inspection* of men. He should not only be able to judge that they are free from disease; but his knowledge should extend farther. He should be able to determine the state of the future man from the appearance of the boy, and the particular service for which each recruit will be best fitted, and give his opinion accordingly.

Outline of Practice.—In the actual discharge of his medical duty, two great points ought to be embraced by him. The first is the prevention of diseases; and the second is the actual cure of them.

Prevention of Diseases.—If attention is paid to the former, much of the disagreeable part of his duty will be avoided, and an army will be often kept effective by a strict regard to a number of simple and apparently trifling particulars in what respects the regulation of *barracks* and *quarters*, of *diet*, of *clothing*, of *sleep* and *watching*, of *exercise* and *discipline*, which neglected, lead to serious evils, and the certain injury of the service. In fact, the military practitioner who is conscientiously to perform his duty, must look more to the avoiding of malady than the actual cure of it; and without entering into the *minutiæ* of a soldier's life, he is unfit to perform the most important part of his task.

Hospitals.—The cure of military diseases is conducted chiefly by the establishment of hospitals; certainly the best plan, as rendering every patient more immediately under medical direction and controul. Military hospitals are accordingly one of the first subjects for a medical practitioner to study; and their regulations should be formed on such a scale, as not only to comprise a set of general rules, but they should descend to particular regulations for all the chief forms of diseases to which a military life is subjected. One of the first

subjects here is the precautions that ought to be observed on the introduction of patients into the hospitals according to the nature of the diseases. Fevers and dysentery claim this attention in a particular manner, and demand a minute set of restrictive directions.

The treatment of the sick in the hospitals must be regulated, besides the form of the disease, by the various circumstances of climate and situation, having it always in mind that military practise requires *bold* and *energetic* measures: and that the absence from duty in the day of actual service is perhaps an irreparable loss to the country. Hence the necessity of a medical practitioner possessing superior professional knowledge to others, *much decision*, and a great deal of *acquired* experience; nay, his judgment will often decide him to abandon the hospital system, to choose insulated situations for the sick in warm climates, rather than croud them together, when it is known to prevent or retard recovery.

Camps.—There are two situations you, Sir, know well, in which the life of a soldier is passed; either in quarters and barracks, or in the camp. The latter is the situation in which he is most exposed to diseases; and much depends on the medical practitioner to avert these by judicious advice, and by a knowledge of what will oppose the evils that would otherwise arise. One of the first points here is the scite of the camp, or the spot where it ought to be formed in regard to salubrity and convenience. The next is the most proper mode of fitting up the residence of the men; the 3d is, the regulation of their conduct while in camp: and the 4th is, the actual treatment of their diseases.

These are a few only of what I may term the preliminary subjects that belong to a military practitioner; but even these give rise to observations which cannot fail to strike, one of your experience in military concerns, and to point out the necessity, in order to the welfare of the service, that the commander and medical practitioner should thoroughly

understand each other on these topics. The commander is to see that the surgeon performs his duty, and the surgeon is to give the proper advice to the commander in what may affect the health and convenience of the men. No commander can judge whether a surgeon is *competent* to his duty, without *some code of regulations* or instructions to give him information; no surgeon can execute his duty without having *experience* on the different subjects that constitute the *foundation* of it; and which, if he wants a set of *proper* regulations, such as are now pointed out would do much to supply.

That improvement is wanting in the medical department, I have the evidence of the Report of Military Inquiry, which expressly declares so, to confirm. In his interference at different times no doubt his Royal Highness, as commander in chief, has made every amelioration in his power, as far as suggestions were imparted for his consideration. But the professional characters the commander in chief applied to had no wish, and what is nearer the truth, no interest in making alterations that would only increase the duties of their situation. Trifling changes therefore, of little moment, could only be looked for. His Royal Highness not being a professional character, could not be supposed to find out a radical cure: but common sense, and the general opinion of mankind, will both concur in this fact, *Give* the military practitioners the *proper share of knowledge they ought to possess*, and this is the highest of improvement in this department that the service requires. That the present plan proposed may be termed a radical cure will not admit dispute; for if medicine, which the profession are unfortunately compelled to acknowledge, is at best a conjectural act, the great improvement it requires is to place it as far as possible on the fixed basis of united *collected* experience, and not leave its application entirely to the caprice, gnorance, erroneous judgment, or inexperience of young military practitioners, to give certain established

data to go by, certain land marks to carry them through the abyss of professional doubts and difficulties, and to clothe the greenhorn with the garment of experience, and the wisdom of age. In doing this, Sir, you will also observe, the present plan makes no infringement on the present order of things: it includes every improvement which has come from other quarters, while it strikes at the foundation of every defect without erazing a stone of the present superstructure.

With these important facts kept in your view, I proceed, Sir, in my detail,

The introductory subjects already stated lead to the main object, viz. the varied circumstances which the treatment of disease, and the restoration of health and vigour in military life demand. In tracing this we are led to consider the various stations of military service, and to point out what is peculiar and important in each.—The dominions belonging to the British empire are so extended as to form, in a medical view, no less than *six different medical stations;* and of these, the first, and perhaps least important of the whole, is the *home station.*

Home Station.—The diseases of Britain may be divided into those of the winter, and those of the summer months. They differ from the diseases in civil life less than in other military stations, because the service of the home station is regular and established. No extraordinary exertions attend it, such as in scenes of action, and where war is the business of the day. It may be considered merely as the school of discipline to prepare for foreign service. The causes of disease here are also less varied, and they arise either from vicissitudes of weather, or excess and indulgence. They occur in subjects also that admit a bold and energetic practice. On these accounts, the diseases of the home station are not the field to give experience to the military practitioner. They want the malignity of appearance; the rapid progress, and the destructive ravages which attend the steps of disease

very closely in the foreign stations. The surgeon in Britain may trust a great deal to the efforts of nature for the recovery of his patient, and recovery will take place, though the service may be longer deprived of the attendance of the men on duty.

Leaving, then, the further consideration of the home station, as admitting a more regular, simple, and defined practice, in the exercise of which abilities and superior experience are less required, I proceed to direct your attention to services of more unhealthy occupation. But before commencing this description, permit me to state the necessity of an acquaintance with certain preliminary points, which, you will perceive, form no less an object of the surgeon's duty.

Introduction to Foreign Stations.—These are, the precautions to be observed in transporting troops. As troops for foreign stations must all be conveyed by sea, the best method of shipping them is certainly a subject of study; their accomodation also while at sea is connected with it. The various circumstances necessary to the preservation of their health in this situation are no less important objects of inquiry, as well as the most suitable treatment for such complaints, as arise during their voyage, should these precautions prove insufficient. Without a due regard to all these circumstances, it is clear the troops will be unfit for service when landed, and the very object of fitting out an expedition for a foreign station thus defeated. These, you will allow, are topics highly interesting to the military practitioner. No man can acquit himself in these situations, or give directions by intuition, and where, under the present system, is he to find regulations and instructions to point out his conduct? It is not a lesson he has been taught at school, and till he acquires it by personal experience, he must commit many serious blunders. These are plain truths that must speak to your mind, and to the conviction of every man without the

possibility of denial. I shall, however, suppose the troops are landed: I shall next trace the various circumstances in which the foreign stations differ in climate and diseases from the home service.

The Mediterranean Station.—The first of the foreign stations, and one of the highest interest at present, is the Mediterranean, which includes the three settlements of Gibraltar, Minorca, Malta, and perhaps also Sicily.

This station may be considered as an intermediate situation between the service of Britain and that of the tropical climates. The diseases of this station resemble those of summer in Britain, and do not make that rapid progress which distinguishes those of the tropical regions. They consist chiefly of fevers, inflammatory affections of chest, and dysentery. The affections of chest are evidently the consequence of the sudden transition from the variable climate of Britain to the more steady and temperate atmosphere of the Mediterranean. The dysentery, though connected with the same cause, is too often augmented, if not produced by the excessive use of wine, a beverage to which troops from the mother country are unaccustomed.

The certain attack of these diseases, and the mortality they produce, will point out to you of what importance it is to prevent them, by a proper attention to the health of the men on their passage, by lowering the inflammatory habit of the colder climate, and taking such precautions as may render the action of any morbid cause on their arrival less effectual. Nor is an attention to the regulation of diet less requisite. The directions respecting this should be properly laid down by the surgeon, and enforced by the commander. It is experience, and experience only, can teach the means of doing this, and impress the necessity of its being complied with.

West-India Station.—But the topical climates are the fertile seat of disease, and none of them so much so as the West-India station.

The mortality of the West-India islands has been long and deservedly a matter of the deepest regret, while they form one of the richest gems of the British crown, yield a revenue highly productive, and prove the greatest nursery for the naval strength of the country; this revenue, and these important advantages, it must be admitted, are acquired at an expence of population to the parent state alarming in the highest degree. Nor has this mortality been confined at any time solely to the period of war. The same ravages of disease have embittered the enjoyment of peace, and the laudable career of enterprise and industry displayed by the emigrants from the mother country, is too often cut short, ere they have well fixed themselves in their colonial situations; and much more does this mortality fall upon the troops. The mortality of this station has, indeed, been long proverbial; of late years it has increased by the appearance of a new disease, rapid in its progress, and fatal in its nature; this is the yellow fever, or what may be more properly termed, the plague of that hemisphere. On the treatment of this disease, you are aware much difference of opinion prevails even among the most experienced of the profession. This being the case, is it not proper that some general regulations should be drawn up for the information of young practitioners? In a disease of such general mortality, is it fit that every practitioner should be left to his own discretion? Besides on this station there are not only diseases peculiar to the climate, but also to certain parts of it, as witness the peculiar diseases of Barbadoes, which are totally unknown in Europe, and do not yield to European practice. How is the military practitioner to know these without directions? and what directions would be so fit as those drawn up in the manner I propose? On such points, I beg, Sir, you will pause: they cannot be answered or contradicted. But if the mortality of the West-India station is so great, ought not precautions to be taken also in the passage of the troops,

to guard as far as possible against their attack? Ought not the regulations proposed with this view to be pointed out, and in the possession of every military surgeon? And ought not also a similar medical attention to the conduct of the troops upon land to be enforced, in order to prevent excesses which may render the causes of disease more active?

East-India Station.—The next military station in point of importance is the East Indies. Here, from the extent of territory and the variety of climate, a wide field opens for the conduct of the military practitioner. For this station a separate establishment prevails, under the direction of the East India Company, and one in many respects, if you, Sir, will take the trouble of investigating it, superior to the medical establishment of the other parts of the empire. But still, though the surgeon, from the constitution of the establishment, and the promotions by seniority, comes sooner to be a man of more knowledge and medical acquirement than in the regular establishment, yet his first onset, his debut, labours under the same disadvantages and imperfectoins as elsewhere. The variety and extent of practice require experience and observation, which he wants. The diseases are also many of them peculiar here, and differ from those of the other tropical regions. Witness the Berbery of Ceylon, a disease only known in that quarter. The troops also are two-thirds natives, under the name of Seapoys, whose diseases and mode of living are different from European troops. You, Sir, will also be pleased to remark, that while dysentery may be considered as the most fatal malady of troops in other stations, and may be viewed on land in the same light as scurvy at sea, hepatic complaints are the most formidable on the East India station. All this a military practitioner may be told in general, but the giving accurate and minute directions is the only plan that can lead to a successful practice. The more the present subject is prosecuted, the more you will be convinced of the propriety of the suggestions

now addressed to your consideration. But I shall proceed to the remaining stations.

America, as now open to the British troops, confines their situation to the province of Canada, the temperature of which may be viewed as the climate of Britain in extreme.—Long and severe winters are succeeded by short and scorching summers; the winter diseases are therefore highly inflammatory. Those of summer tend to a prutrescent disposition. Though this station does not afford the same field as the tropical ones, yet you will admit, that hardening troops for this climate is a point of important consideration.

Egypt.—The last, and perhaps what may be termed only an occasional station, where troops are sent to, is Egypt; a country peculiar in its climate, manners, and diseases, the reliques of which the troops of Britain have every day cause to deplore. The two chief diseases of this climate are plague and ophthalmia. You, Sir, from what you have seen, will not surely deny the necessity of experience in these.—Measures to check the progress of plague have met the encouragement of every government in Europe, and to assist the treatment of Egyptian ophthalmia, it has even been found necessary, as you know, for the inspector-general to draw up directions. If these directions are of any use on one subject, why are they not extended to the whole, and where is the plan equal to what is now suggested? The foundation of all science is facts drawn from experience; experience, unless drawn from others, is the slow offspring of time: it can only be matured in the manner I propose.

In finishing this outline of the different medical stations of military service, an important subject remains for your notice, the precaution that ought to be observed in the change of troops from Britain to the warmer regions.

Seasoning of Troops.—It is well known the human constitution can accommodate itself to every change of temperature without danger, if changes are brought on by degrees.

We are the children of habit, and custom has a powerful influence on every action, feeling, and thought. A removal immediately from the colder regions of the north to a vertical sun, is certainly highly injurious to all those whose occupations, such as those of military life, are connected with active exertions. Thus it is found that an European soldier is nearly two years in the East Indies before he is able to endure the fatigues of active duty. What was the great merit of the late Lord Lake? Was it not that he was able, by the management of his troops, to march them so rapidly that the enemy had no idea of their being able to make such progress, and were therefore taken by surprise. To render the European troops, then, fit for the service of the warmer regious, they shold be first seasoned by a residence in the Mediterranean, and from that draughted for East or West India service. Thus also the diseases of the Mediterranean station should be studied as a cue or introduction to the more malignant maladies of East and West India origin.

Selection of Troops for Tropical Service.—Besides this seasoning of troops for active service in the warmer climates, a selection of them, in order to the preservation of their health, is no less necessary. It is a fact well established, that the virulent contagions of the East and West Indies, make a stronger impression on the flower of youth and vigour than after the age of forty. This, then, is an important point to be attended to. Certain diseases also peculiar to the colder climates, particularly consumption of the lungs, gout, &c. &c. are removed by a residence in a warm climate.

In this cursory view I am only permitted, you will observe, merely to hint at the various medical topics which belong to military service. These hints as yet relate to medicine alone, and a military practitioner is more than two-thirds of his duty employed as a physician rather than as a surgeon. The distinctions, therefore, in the service, are a matter of no moment: a military practitioner should learn

equally the business of the physician, of the surgeon, and of the apothecary. The real business of surgery he has little occasion for but in the field and during the scene of action; and here the experience and instruction I contend for, is equally necessary as in every other part of the service. The coolness and precision necessary to act here with success, can only be acquired by previous instructions and experience.—The great object he is to have in view, is the treatment of gun-shot wounds, and the various improvements which can be made to alleviate pain, check hæmorrhage, and induce speedy renovation, are the points to seek for instruction upon.

Following the system of the great Frederick of Prussia, he is to save every limb possible, and avoid mutilation. On these observations I might still enlarge, for even the preparation of the forms of medicine for military practice is a subject of high value to the young surgeon.

But I shall not intrude longer on your patience. I trust I have said enough to lead your attention to the subject. I submit the propriety and necessity of the measure to every medical character, and from their decision I leave you to draw your conclusion. Instruct the military practitioner as he ought to be, and draw him up careful rules for his conduct. No other improvement is necessary to the medical department. Complicated establishments will then be unnecessary, for when a surgeon is taught to know, he will seldom be backward in performing his duty.

I have the honour to be, Sir,

With high consideration,

Your most obedient,

And very humble Servant,

London, Feb. 20, 1809. WM. NISBET.

II. SURGERY.

The leading merit of a practical Surgeon is to be found more in his proper management and mode of regulating inflammation than in any other part of the science. It is by this process all changes of parts, whether morbid or salutary, take place, and to terminate it happily when of a morbid nature, or to render it an active agent to produce a successful issue, are points that require often much judgment, nice discrmination, and a proper knowledge of the powers and energies of the living machine.

This might be instanced in a vast variety of cases, perhaps the radical cure of hydrocele by injection is one of the most striking examples. If the inflammation here is either excited in too high a degree, or does not reach the proper height, the operation in both cases will fail of its effect in completing an adhesion of the sides of the sac, and the surgeon's after-management entirely guides the success of the operation. The treatment of inflammation, then, may be considered as the *beginning* and *end* of all a surgeon's knowledge, and his attention to it cannot be inculcated too strongly.

Next to inflammation, the treatment of wounds is a subject of great importance. To be able to determine what nature will do from a close and attentive observation of her efforts is the summit of practical knowledge in this branch. In the human subject, her powers are not equal to what she displays with the inferior animals. The claw of a crab will be entirely renovated when torn off, and an eel cut in pieces will renew its lost parts. In man, however, nature proceeds to renew her work with a sparing hand; yet still we are at times unexpectedly surprised with cures which could not be looked for. It was perhaps from this fact, though not frequent, that Balguer, surgeon to the great Frederick of Prussia, laid aside entirely the operation of amputation in

gunshot wounds. In this way, certainly many limbs were saved; but whether the inconvenience arising from tedious cures, and the incomplete use of the member afterwards might not counterbalance the advantages attendant on preserving it has been doubted by many authors.

REPLY OF DR. REECE TO T. B. ON ADMIRAL HENRY'S CASE OF CATARACT, WITH THE ADMIRAL'S OWN STATEMENT.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—In your last number, an explanation is required from me of some particulars in Admiral Henry's case of Cataract. Whether the obscurity stated by your correspondent is owing to the sublimity of my style, as hinted, or to the fault your correspondent attributes to himself, I shall not determine. I have thought it best, however, to make the gallant Admiral tell his own story, which, like the proceeding of a real British tar, is more occupied in the statement of facts than the frivolity of expression.

I am, Gentlemen, your obedient Servant,

Henrietta Street, Feb. 15. R. REECE.

Dear Sir—I received your favour of the 4th inst. yesterday. With a phial bottle about 5 in. long, and about ½ inch diameter, I punched my eye, and rubbed the eyeball from side to side, with as much violence as I could possibly bear, and with the rim, at the mouth of the bottle, I did the same up and down; when the eye would no longer bear so violent an application, I let it rest a few days or a week, and repeated the operation as soon as it would admit of it. The complaint in my eye was a Cataract, and by the above method, I suppose an absorption took place, and I see with it just as well as if the Cataract, had been extracted. I see to read the smallest print in the newspapers with a glass of 2¼ in. focus, and I see things at a distance tolerably well with one of 3½ in. focus, but with neither glass, so well as when

the eye was good. Both my eyes had Cataracts in them, one failed after extraction from inflammation and the sight is totally lost.

For the gout and rheumatism I recommended the same instrument, and to be applied in the same manner to the parts affected when the fit is off; with the addition of pinching the parts with as much strength as the fingers and thumb can give. The phial should be corked up tight, and the cork cut close to the glass. I recommended a *phial* because it never breaks up the skin. It is always best to operate for the gout or rheumatism in one's bed. I mean to be in London in May, when I shall be glad to give any further information in my power.

I am, Sir, your most obedient Servant,
JOHN HENRY.

REMARKS ON ADMIRAL HENRY'S CASE.

From the above statement I can have no doubt that absorption of the lens must have taken place. The lens being articulated to the capsule, but in a slight manner, any change which may produce a separation occasions the lens to become then an extraneous body floating in the humours, and its vitality being thus destroyed, it must shrink and be absorbed. It is only in this way we can account for cures of cataract frequently taking place in the hands of the surgeon, while preparing the patient for the operation. The frequent examination and irritation of the eye may in the hardened state of the lens produce this separation stated, and the absorption in consequence of that go on. That instances of the absorption of the capsule also take place has been proved. But the opinion suggested, we conceive the simpler of the two, and as no dissections have been made to ascertain this circumstance, though the fact of such cures is sufficiently established, the explanation that is easiest and simplest, and does not require the exertion of extraordinary powers in the part, is the one to be adopted.

THE CASE OF A BOY WHO SWALLOWED A HALF-PENNY, FROM THE COMMUNICATION OF DR. BLEGBOROUGH.

THE following communication was given *vivâ voce* by our correspondent, Dr. Blegborough, whose avocations at present did not permit him leisure to commit it to paper. The case is singular, as leading to several important conclusions.

The son of Mr. Thompson, coach-maker, of Pleasant-row, Blackfriars-road, a Boy of three years old on the 20th of June last, on the 29th of October accidentally let a half-penny down his throat, for we cannot say he swallowed it: it continued in the gullet to the 31st January, when it was discharged in a fit of the hooping-cough with which he had been seized. During the whole of this time the lodgment of this extraneous body gave no uneasiness, though it could be even felt, and on carefully inspecting it, it does not appear to have suffered any solution or oxydation from the action of the animal fluids secreted in its neighbourhood, and coming in contact with it. A similar case occurred to the same gentleman several years ago, which was retained for the same length of time, and also gave no uneasiness: it was at last brought up by a strong exertion of vomiting.

From these cases the following conclusions may be drawn:

First, That the gullet is a part of little sensibility; that it is capable of much extension, without inconvenience; and that though possessed greatly of muscular fibres, which are placed both in a longitudinal and circular direction, they do not seem to possess that strong irritability as in other parts. Unless this be the case, how are we to account for the retention of substances for such a length of time without inconvenience and without pain. But this lessened irritability would seem as if confined more to the under than upper part of the canal; for the occurrence of spasm and other nervous symptoms are proofs that no lessened irritability prevails at the commencement of the passage.

A second conclusion to be drawn from this accident is,

that the secreted fluids both of the mouth and throat possess little power of solution. Whatever activity the saliva may receive on passing into the stomach, and mixing with the gastric juice, it is innoxious, it would seem in its original state.

A third conclusion to be drawn is, that copper, however virulent as a poison, is only rendered so by oxydation, and no acid being present to produce this change, even if accidentally produced from the food and drink passing into the stomach, its application does not seem to have been made sufficiently long to ensure this effect. The halfpenny appears, on inspection, to have no marks of solution.

Since writing the above, a still more remarkable case of the same kind has been mentioned in Mr. Capon, who formerly kept the Crown Inn, Lowestoffe, in Suffolk. This person accidentally getting a crown-piece into his mouth, it passed into the throat, where it was retained for several years, and at last was brought up in a fit of laughter. No inconvenience occurred during this period from its retention.

Practical Observations on the Diseases of the Joints, commonly called White-swelling; with Remarks on Caries, Necrosis, and scrofulous Abscess, in which a new and succesful method of treating these complaints is pointed out. By Bryan Crowther, Member of the Royal Colledge of Surgeons in London, and Surgeon to Bridewell and Bethlem Hospital.

(Continued from Vol. II. page 162.)

In our continuation of this useful performance, we have to observe that many of Mr. Crowther's ideas on this subject are new and all very important: our limits will not permit us to make many extracts, therefore, we shall conclude this Review with the Author's statement on Necrosis.

"The soft parts investing the bone which is undergoing

necrosis, suffer in the same manner as we have described in white-swellings: they inflame and suppurate, and at this period the patient is brought into a very alarming and hazardous situation. To relieve this complaint, an operation has been proposed, that of denuding the new osseous shell, and perforating it with a view to extract the sequestra. In some cases, in which the bone has become dead to a small extent, and is thinly covered, such an attempt might be feasible; but in the majority of instances, and especially in the thigh bone, it must be utterly impracticable.—Amputation might certainly be performed in these cases, but not without the probability of extensive exfoilation. I can recommend a mode of treatment which supersedes the necessity of either of these formidable operations, which indeed is exactly similar to that adopted for the relief of soft parts covering a diseased joint.

"The occasional application of leeches, combined with the use of blisters, and the savine cerate, will obviate the occurrence of abscess; a most important point in the treatment of the complaint. If the external parts are kept free from disease, by these means, the absorption of the sequestra will in process of time be effected. The extent to which these remedies must be employed, and the frequency of their repetition must depend upon the irritation excited in the external parts. If there is an interval of ease, and the limb is neither swollen or tender to the touch, the treatment may be interrupted for a time; but whenever pain is again felt, the use of leeches must be immediately resorted to; and when ease has been procured by their application, blisters and the savine cerate must be again employed. The first case I ever treated in this manner, I mistook for a disease of the thigh bone. The patient became so well as to quit St. Clement's Workhouse, to which she returned after an absence of above six months, in a hectic and miserably reduced condition, having just quitted a hospital, in which

she had been salivated. Although I succeeded in preventing the formation of abscess, she died in three weeks, and afforded me an opportunity of examining her disease, which I found to be necrosis, and not, as I first examined, a carious bone. I have been equally successful, and less ignorant of the nature of the case in other instances; but I will not claim the merit of being the original proposer of this mode of treatment: for when I communicated my notions on the subject to Mr. ABERNETHY, I found that he had already in his lectures promulgated this doctrine; to him therefore mankind is more largely indebted for the usefulness and propriety of this mode of treatment, than may have been hitherto conceived. I only know, that we think alike on the subject of cure, and shall leave to his much more able pen the publication of his own remarks."

Observations on some alleged consequences of Gonorrhœa, by Mr. F. Kiernan, Member of the Royal College of Surgeons, London.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—No disease is perhaps so little in the power of the Surgeon as the treatment of Gonorrhœa. That it will spontaneously cease without any means, practitioners agree, and consequences often arise from this apparently simple affection, which equally surprise and distress us. I allude here to some peculiar affections which have been mentioned by authors as immediately succeeding sudden suppression of its discharge, and which has led of course to a confirmation of the opinion formerly entertained, that there was something critical in its evacuation, and that the modes of practice should be such as promoted it. The laws of sympathy we are as yet not sufficiently acquainted with, and therefore to deny them and their consequences, would be presuming too far, though to admit them implicitly, would savour strongly at the same time of credulity. All the affections

arising from this source, are marked by a violence of symptoms uncommon to the nature of the disease, and two of them have been particularly insisted on, Ophthalmia and Deafness.

Both of these affections are attended here with the most acute inflammation, more so, perhaps, than in any other case, so as totally to destroy in a few days, if continuing, the functions of the respective organs. The former of these was first described by Mr. Ives in his Treatise on the Diseases of the Eye. It was afterwards taken notice of by Dr. Astruc, and is lately mentioned by Dr. Swediaur: and other instances of it occur in different periodical publications. It is now by more modern writers assimilated with the Egyptian Ophthalmia, and supposed to derive its origin from a similar source. The eye in this case becomes reddish and inflamed, with considerable pain, and a constant flow of tears. The eye-lids likewise partake of this state, being swelled so as not to cover the eye, and a thickish yellow matter oozes from the setaceous glands. The disease, if continuing, is soon attended with an opacity of the cornea; and though symptoms of lues frequently affect the eyes, yet they are never attended with the danger of the present complaint, as if not immediately relieved, blindness commonly ensues in a few days. The cure is effected in two ways: either,

1st, By recalling the original disease; or 2d, lessening inflammation in the part, by scarification of the conjunctiva, and other topical means of removing increased action.

Deafness, the other affection from the same source, is equally violent in its symptoms with the former, attended with most acute pains, and suppuration soon forms, and the structure of the ear coming to be destroyed, the loss of hearing is never to be again repaired. The method of treatment is much the same with that of ophthalmia, allowing for the different structure of parts, and the grand point is in all these cases

to subdue the activity of the inflammation before it pass into any secondary state, particularly suppuration.

Paralysis has been also mentioned as an effect of Retropulsed Gonorrhœa. It is generally partial, and in the 6th volume of the Medical Commentaries is recited a very remarkable case of this kind, which obstinately resisted every remedy till a Mercurial course at last being begun a complete cure was effected, and in its progress the original affection of the urethra returned with the same violence as marks the incipient state of the disease.

But all these affections are to be considered as very rare, and as yet we have not had sufficient experience to ascertain with exactness their true nature, so that we are obliged to go by the opinions of authors who frequently ascribe to this cause whatever affection occurs during the progress of gonorrhœa, where it perhaps may be more justly referred to another source; for, even the cure by mercury, and also the return of the original affection are by no means certain marks of the disease arising from this source: Mercury cures many diseases, and its stimulant powers are certainly favourable in many cases to the removal of paralysis, while the urethra, we know, after gonorrhœa, similar to other parts the seat of hœmorrhage, retains its disposition to continue the discharge; and this more especially when an universal increase of circulation is produced by the action of mercury.

If the above hints will induce any of your correspondents to favour me with a full account of these different sympathetic affections, they will confer an obligation on,

Gentlemen, your obedient Servant,

F. KIERNAN.

Charlotte Sreet, Bedford Square,
Feb. 15, 1809.

III. MIDWIFERY.

It has been long a subject of doubt with accoucheurs whether labour is to be considered as a state of actual disease. It was on this principle practitioners formerly used to direct their treatment, and the antiphlogistic plan was therefore carried on by them to an extent, which from the debility induced by it, frequently ended in real disease. One of the great modern improvements in obstetrical practice is treating the patient as bordering on the state of health, and neither subjecting her to low diet or tedious confinement.

Certain symptoms in childbed have been considered as giving a prognosis in respect to recovery. One of these is the regular flow of the lochia; but even to this, many exceptions frequently arise. A case occurred about a month ago to an eminent accoucheur, where no appearance at all took place from the very termination of labour to the period of recovery, and the patient got sooner well without the appearance than in any of her former lyings-in. This case, so singular in its course, and deviating so much from common habit, was minutely examined by several practitioners, whose testimony can be adduced to support the truth of it. All general rules are liable to exceptions; and the anxioms built upon them shew the weakness of the structure on which they are raised.

COMMUNICATION ON RETROVERTED UTERUS, BY MR. MELLIS, MEMBER OF THE ROYAL COLLEGE OF SURGEONS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—In a former number of your valuable work, a case was related of inversion of the uterus; a disease generally fatal, unless immediate relief is afforded. There is another disease which, though not so fatal, is apt to prove highly inconvenient and distressing to many women during preg-

nancy—that is, the retroverted uterus. Dr. Hunter has the merit of first describing this formidable complaint. It occurs about the fifth month, immediately before the uterus rises to be supported on the promontory of the Sacrum. At this period the uterus, being weighty from some cause, its fundus is apt to descend suddenly into its hollow, which occasions the os tincæ to be tilted up in the opposite direction; and thus the situation of the urethra becomes altered, and an obstacle occurs to the discharge of urine.

The symptoms of this disease are at first mild and deceitful. Some uterine pain is felt, attended with a slight inclination to void urine. It passes with difficulty at first, but as the efforts and pain increase, a total obstruction occurs. This obstruction allowed to continue, and the displacement of the uterus always augmenting, produce soon the most dangerous situation to the patient. From the passages of the urethra and rectum being both shut up, inflammation and all its consequences arise, and it is sometimes hardly possible to replace the retroverted organ. Of this disease many remarkable instances are to be found in authors, where the quantity of urine accumulated, and distension of the bladder had proceeded to the most extraordinary length.

The late Professor Young used to state in his lectures one case, where he drew off no less than 18 pints. The late Dr. Aikin relates another, where he took off 12 pints. I have myself known several fatal instances of this disease. The victims of it are commonly in the lower order of life. Women of better condition, when they feel uneasiness and bearing-down pains, at this period, are inclined to take rest, which abates the symptoms, and prevents the disease proceeding to a formidable length. The prevention should in all cases be the great object; and women should therefore be cautioned by those who attend them, of what may occur at this period, so that any formidable increase of it may be prevented. Those women in whom the pelvis is well made, and

capacious, are more liable to it. The fatal termination in this disease is either by fever or convulsions; and before the latter ensue, the distension of the bladder is generally so great as to reach as high in the abdomen as what marks the seventh or eighth month of pregnancy, or much above the umbilicus.

These hints are merely directed to young practitioners, in order to avoid an evil which may always with a little care be easily prevented. The treatment is obvious by drawing off the urine where it is practicable, and replacing the organ. In the last stage of the malady, this is too often not easily accomplished; and various expedients have been proposed for producing abortion by opening the *os tincæ*, or even dividing the *symphysis pubis* by the operation of Sigault. The first is difficult, as the *os tincæ* in these cases cannot easily be reached. The latter is hardly admissible, except in the most forlorn circumstances; neither am I convinced that it would prove successful if performed.

I am, Gentlemen,
Your obedient Servant,
Thornhaugh Street, Feb. 12, 1809. JOHN MELLIS.

OBSERVATIONS ON RIGIDITY OF THE MEMBRANES.

To the Editors of The Medical and Surgicol Spectator.

Gentlemen—THICKNESS of the membranes has been mentioned as a cause of tedious labour, and there can be no doubt of its frequently proving so. This thickness or rigidity is not in general to any great extent; and in such cases it is surprising what wonderful effects arise from a single bleeding to expedite the labour. I have seen a woman who had lain for hours with the strongest pains, without their producing the smallest effect, and after the *tincæ* had been fully dilated, on being bled to the extent of eight or ten ounces, instantaneously has the labour accelerated, and she has been delivered in the course of a few pains, though they had not

before had the smallest influence, or a total suspension of them had taken place for a great many hours. Once in my life I met with a morbid thickness of the membranes to that degree that the *ovum* was expelled entire. On cutting into them, they seemed something of a fleshy texture, and in this case there were little or no waters. This complete expulsion of the *ovum* has been considered by some as the most natural state of labour. It is, however, certainly a most dangerous one, as flooding may occur, and nature has provided that this circumstance should rarely happen as a precaution against it. If these observations contain any thing worthy of notice, they are at your service, from,

Gentlemen, your obedient servant,

T. BROWN.

Oxford-Street, Feb. 1,2 1809.

On the Symptoms and Nature of Schirrous in the Uterns, by Mr. Kilpatrick, Member of the Royal College of Surgeons, London.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—It is chiefly by changes in the uterine system of females, that their good and bad health is found to be regulated. This disease often occurs at an early period of life, and affects mensuration, &c. The structure of the uterus, like those of the liver, is very liable to this state, though more frequently it takes place about the time when the menses depart.

The symptoms of this disease are, 1st, a sense of weight or heavy pain in the uterus or about the pubes.

2d, Irregular and long-continued floodings, seldom drying up, or soon returning.

3d, Morbid state of some contiguous organs, as strangury, tenesmus, &c.

Though schirrus may occur at any time of life, yet it is most frequently, as we observed, towards its decline, that its

attacks are made. The several glands then lose much of that activity which they displayed in the former period; to expedite their secretions, and the loss in part of their activity, exposes them to all the effects which slowness of circulation, rising to a morbid degree, produces. What is the peculiar change that takes place in schirrus we cannot determine. By many authors, a partial loss of vascular substance in the part is supposed to arise; but, even admitting this, it is not sufficient to account for the peculiar morbid state we find induced.

Injuries of the uterus have been supposed a common cause of schirrus. They may be so, and, it is probable, are so; but we find that women who have had children, whose uterus consequently has been most exposed to such injuries, are the the least subject to this disease. The same may be said of many other causes enumerated by authors. From observation, we find that it is most usually from some internal source, the existence and operation of which we cannot detect till it is beyond our power to remedy it.

The treatment of this disease, it is in vain for any practitioner to attempt; a palliative plan, by mild diet and opiates, is all that is in our power. I have never seen any benefit from the preparations of iron, so much praised by some practitioners. The advantages of a water-diet have been strongly pointed out by Mr. Pearson, in his *Treatise on Cancer*; and the same have been prosecuted farther with much industry by Dr. Lambe.

I am, Gentlemen,

Your obedient Servant,

St. Martin's Lane, Feb. 20, 1809. W. KILPATRICK.

On the Use of the Lever, by Mr. Grice, Member of the Royal College of Surgeons.

Gentlemen—The use of instruments in the practice of midwifery has been blamed, perhaps, in some degree it does not deserve. Without such means in tedious cases, the lives of many females, as well as of the children, could not be saved. One of the most useful instruments in this view is the simple lever applied either to the pubes, or the side of the pelvis. In the former case, however, it has most purchase.

On this instrument it may be remarked, that before its publication as the Roonhuysian secret, it possessed a degree of credit equal to the greatest discoveries; but no sooner was it made known, than it lost greatly of that reputation it had formerly acquired. The simplicity indeed of the contrivance, and some inconveniencies that appeared to attend its application, were the causes of this change; and the forceps seemed, therefore, an instrument more deserving attention, as well as more capable of improvement. Thus, from the time the forceps came to be employed, most of the writers on midwifery have entered into a comparison of the relative advantages attending the use of each.

The objections urged against the lever are chiefly on account of its fulcrum, or rest in action, being on the pubes; as its power, if sufficiently strong, must be proportionally exerted against the urethra, or bladder of urine. On this account, many accidents have been known to succeed its application; and several practitioners have directed its being introduced, on the contrary, from the side of the pelvis, or along the surface of one of the ischia; but in this situation it cannot act with the same advantage, as the resistance to the passage of the head is chiefly from the transverse diameter of the pelvis.

The objections thus urged against the lever, we contend, have arisen more from practitioners when employing it, not

attending to particular circumstances in its form, size, and application.

With respect to its size, the original Roonhuysian one was too small, and on that account pressed entirely on the situation of the urethra, not being sufficiently expanded to rest upon the more distant parts of the pubes. It was at the same time entirely solid, so that it could not avoid injuring the part on which it pressed. We would, therefore, recommend that its breadth be pretty considerable, that its blade should also be hollowed for the greater part, so that a sufficient space may be allowed for the safety of the urethra; which, if the practitioner is attentive in his application, will escape entirely being compressed by the instrument. In regard to its form, its blade should possess a greater curve than the forceps, so as to be applied accurately to the convexity of the occiput, that it may not slip after being applied; for it is generally more difficult to introduce it than the forceps, the space being more confined, and this difficulty is even increased by its curved shape: for this reason the late Dr. Aikin has constructed what he terms a living lever, which is introduced straight, and, by turning a screw, it then receives the proper curve, which adapts it to the presenting part; but the fault of this instrument is, that what advantage it possesses over the other facility of introduction is counterbalanced by its proportionate want of power; for where much force is required, it bends too readily, and thus easily loses its hold, requiring a new introduction.

As the chief objection arose against the lever, from its rest being on the pubes, modern practitioners have endeavoured by means of a hole at this part, through which a piece of string is fastened, by pulling it down here with one hand, while the other is applied to the handle, to lessen its pressure, and thus avoid the consequences which its use, according to the former method, produced. It is with its improvement that it is, at present, much employed by the London practitioners.

The length of the lever is also a circumstance, in order to its successful application, requiring attention; for if too short, its power is not sufficient to bring down the head; and the longer, therefore, it is made, the more successful will its application be found.

For these reasons, we consider the lever as, in many cases, a very useful instrument, and as by no means deserving that indiscriminate censure it has received from many authors. Its application would certainly be by no means proper in high cases of distortion, neither will it succeed where the presenting part is still high, and not at least an inch within the pubes; but in those situations where the head has descended low, where the pelvis is well formed, and where the labour is protracted, chiefly by the absence of pain from the exhausted state of the patient, and some rigidity of the soft parts, it is an instrument better calculated for delivery than the forceps, as it can be used even without the knowledge of the patient; and its action may be increased by changing her posture, or placing her on her knees, while her arms are extended round the waist of another person seated for this purpose.

I am, Gentlemen, your obedient Servant,

Charlotte Street, Fitzroy Square, Feb. 16, 1809. T. G.

Remarkable case of successful delivery in extreme distortion, such as is generally considered to require the Cæsarian operation, by Mr. T. Mainwaring.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—Cases of extreme distortion, fortunately for the sex, are but rarely met with, and where delivery is accomplished in such unfavourable situations, it is a proof of the great improvement which modern times can boast in the exercise of this branch of the healing art. In looking over the cases of *deformed pelvis*, in which the Cæsarian operation has been

performed, it will be found that none of them were more contracted in their dimensions than in the following case:

M. G. aged twenty years, at the full period of uterogestation, had regular labour pains at four o'clock on Monday morning, Dec. 30, 1799; they continued until eight of the same evening, when the membranes were ruptured by contractions of the Uterus; the activity of which was rather increased until Wednesday at noon, January 1st; when T. M. saw her for the first time, he found the projecting angle of the sacrum so near to the *ossa pubis*, as left no more space than about three quarters of an inch; on the right side, the space did not amount to one inch, on the left it exceeded it; he perforated the head at eight in the evening of the same day, after drawing off the water, and as much as possible evacuated its contents by the aid of the curved perforator, and repeated the efforts to the same effect, the next day, with the end of a spoon, the patient being very free from febrile affection, though the pains had not ceased during the whole time,(with very little sleep). No further endeavours were made to effect a delivery, until the forenoon of Saturday the 4th, when the pulse being so frequent as 140 a minute, and the fœtus highly putrid, some of the bones broken by the perforator, were found to have been pushed near an inch forward, and somewhat loosened in their attachment. And several pieces were carefully extracted by the fingers only; at length a hold was found, and the crotchet safely fixed, and guardedly acted with, the two frontal bones were brought away; a number of efforts were made to get another hold, but unsuccessfully, the labour pains continuing, the operator's fingers were employed in extracting pieces of the upper part of the cranium, during which the crotchet was again applied in the basis of the skull, and about half of both (acting by the arm so as to come short of detaching it), the body was brought down. The whole time employed was two hours. The placenta was suffered to remain for three following reasons; first, that the

parts were much irritated, by the operation, and the patient greatly fatigued. The funis so likely to be detached, by lightly acting upon it; and above all the difficulty of introducing the hand into the uterus; that it was determined to let it remain for a few hours, during which the patient fell into a sound sleep; when she awoke, a glyster was given in the evening for the third time; the following day, light pressure being made upon the abdomen, the placenta came away, without acting upon the funis after remaining thirteen hours. The patient passed her water in the usual way during the first five days, after which it came away, without her knowledge, of course without uneasiness. When she became able to leave her bed, it was not in her power to retain it for more than a few seconds, after the inclination took place. It should not be concealed that the bladder in a small degree sloughed, so as to let the urine pass through the aperture: this misfortune may best be accounted for, by having given a longer time for the bones of the head to loosen, than was consistent with the safety of that important receptacle.

At the distance of one month from her delivery, the dimensions of the pelvis were attempted to be ascertained—the deformity was found somewhat to differ now from its state when the head was wedged within its aperture, the left side was so much wider than the right that it admitted three fingers from pubis to sacrum, when the other admitted of only one. In the centre it did not quite admit of two fingers, but that state of it most remarkable, was the projecting angle of the sacrum, which had the shape and size of a considerable round (and hard) tumor, between two and three inches in diameter, projecting so far forwards, as to require the patient to lay on her right side, in order that the right hand of the operator might make the examination of the dimensions with some degree of accuracy. I am, Gentlemen,

Your obedient servant,

Strand, Feb. 25, 1809. T. MAINWARING.

REMARKS.

The above case differs from the celebrated one of Dr. Osborne thus far, that the projection is more from pubes to sacrum than from side to side. The patience and perseverance displayed by the operator reflect on him the highest credit. The allowing the putrefaction of the child fully to take place was certainly favourable to the delivery, and shewed much judgment. Dr. Bland, we understand, was present at this case, and the patient still survives, which, from the recovery, exceeds the delivery made by Dr. Osborne.

IV. PHARMACY

At present offers nothing new to our attention. Many of the oxyds lately introduced into practice have again disappeared, and there is something in the influence of metallic bodies more than the effects arising from their oxydation.

We consider the decline of vegetable remedies in the present state of practice as a serious evil. The metallic oxyds are too active powers to be strongly used or too long continued. The changes of morbid action produced by them must always be at the expense of the constitutent principles or energies of the living fibre. We wish to see the simple system of vegetable means more generally revived and more actively persevered in.

A new species of Bark has lately been shewn us from the West Indies. It possesses much astringency, but little aroma. Of its qualities we shall perhaps be able to speak from experiments with it in our next number.

On the Influence of Metallic Substances as Electric Agents on the human body.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—In your last two numbers the subject of Electricity has been discussed in certain cases of disease. This called my attention to so interesting a subject as well as to the general influence of metallic substances on the body, &c. I was particularly pleased by meeting with a very original and rare publication by my friend Dr. Bache of Birmingham, which possesses so much ingenious reasoning, that I beg leave to request your insertion of the following part. It will be new to your readers, as I believe it was only given to the Doctor's own friends.

" In the wide field of nature, Electric Matter is often so active, that it separates the most dense bodies; it fuses, vitrifies, and variously combines different substances: by its direct and indirect action it is capable of producing inflammation in all combustible bodies, and of causing such a variety of effluvia and gyrations of air, as are capable of affecting our senses very extensively: all these phenomena have been so frequently produced by lightning, and its similarity with Electric Matter has been so clearly proved by Dr. Franklin and others, that I think it unnecessary to appeal to particular experiments for a farther proof of the certainty of any of them. The degrees of motion in Electric Matter cannot be described, as they depend so much upon particular circumstances, that at one time it has been observed to pass through a wire of three miles extent in less than a second, and in other instances I have been a witness that a small quantity has been some hours in making its escape from one side to the other of a small open vial.

" In charging and discharging the Leyden vial, we have an evident proof that this matter is of a very elastic nature; this, I apprehend, is a necessary consequence of repellent

particles being driven into the sphere of each others action: and that explosion is the natural effect of a sudden prevalence of the combined power of such particles over that power by which they were so impelled, together with these circumstances taking place in a medium possessing the properties of air. The inherent properties of Electric Matter are probably but few, but from its peculiarities, subtilty, and force, together with its various modes and degrees of combination with other matters, their joint actions are so numerous, so much divaricated, are often produced in such a gradual manner, and in consequence of such previous and numerous concurring circumstances, that they extend too far beyond the reach of our senses for us ever to be able to decide upon, or perhaps to form a tolerably just conception of them; they may therefore properly be termed infinite. I cannot however help observing that it is by much too common with mankind, either from superstition, or an unphilosophical degree of fear (lest they should find a solution upon natural principles above their reach) to refer every wonderful phenomenon in nature, to the immediate influence of a Divine Energy: such ideas encourage indolence in researches, by plausibly shielding it from reproach; but had Lord Verulam's, or Sir Isaac Newton's genius, fallen victims to such ignoble prejudices, their names would never have been enrolled in the annals of science, and our own understandings would probably have been more circumscribed. Electric Matter is generally diffused through the system of nature;—this appears by its being easily obtained in every quarter of the globe where electrical experiments have been attempted.

"It is also a natural agent, which does sometimes evidently answer purposes highly important to animal life: of this we have a striking instance in the Gymnotas. This animal employs it as the means both of procuring its food, and annoying its enemies;—and when we have such clear testimony of its existence, in an animal whose natural resi-

dence seems to be the most unfavourable of all others for the employment of it, as a constituent part of its system, surely we can find no difficulty in conceiving that it may exist in the bodies of beings, that are apparently much more favourably circumstanced for its retention, and that it may be in them a source of effects which are in the highest degree important to their welfare; and as various natural occurrences and experiments give their united countenance to the idea of its being the Primum Mobile of the animal machine, it will appear to be deserving of some pains to bring into one view, various instances of its connection with the human system, that we may form some judgment of its importance to its welfare, and of the injuries that may result to our constitutions, from its deficiencies or excess. Also to point out some probable means of its introduction into the system, and of accelerating and retarding its escape from it, that we may be able to increase or diminish its influence in some degree according to the direction of our will, and thus to employ it medically with advantage. Captain Brydone observes, that during the Siroc wind at Naples, he was scarcely able, by his electrical machine, to obtain any electric matter; and that persons exposed to the influence of that wind, were commonly so much affected by it, in the state of their spirits, that those who at other times were the most active and volatile that can be imagined, became so destitute of vivacity, as to render them the proverbial objects of comparison for whatever is totally void of that principle; he observes, that it unfits both the body and mind for performing their usual functions.

" We are also informed by the same gentleman, that he has collected from a clean and strong head of hair, as much electric matter, in a few minutes, as he found was sufficient to kindle common spirits, and by means of a small vial, to give many smart shocks to a company who were present at the experiments.

"In diseases I have observed, that the hair commonly becomes soft, and when combed, the action is generally succeeded by head ache or languor.

"In Clavus Hystericus, where the disease has been of long standing (in most instances that have fallen under my observation) I have found the hairs as grey as in old age upon the part affected, though not so upon any other part of the head. Over that part of the human head, where the brain is situated (which is considered as the fountain of nervous energy) there is a considerable quantity of hair at the period of birth, and it generally increases as long as the energy of the system continues to do so, and to become somewhat darker in its colour; but as the vigour of the body declines, it generally becomes lighter, and gradually falls off.

"It is observable also, that hair does not grow upon the pubes in any remarkable quantity, until that period, when the nervous energy in those parts becomes more considerable than in the system at large, and then its increase is great. When Electric Matter is collected by a machine, and thrown into the human body, the hair of the head expands; it is observable, also, that a similar effect has sometimes been seen to take place, in cases of great fright: and the records of medicine afford us some instances of syncope taking place on shaving the head.

"To suppose the hairs destitute of use, is to arraign the wisdom or power of the great Author of nature, in their institution: and I think the several particulars specified above, together with the nature, figure, and situation of the hairs, give some countenance to their being one of the excretory organs to the nervous system. Every other matter employed in the body, after having exerted its influence for a time, seems so far changed in its nature, as to require expulsion, that other matter, similar to it, in a primary state, may be introduced, and by exerting its influence for a time, may support the continued vigour of

the animal, which the alterations induced in the former would no longer admit of its doing: and analogy leads me to suspect that electric matter may be subject to like changes; for succession, as far as we can observe, seems to take place in all other matter as necessarily, and naturally, as in time. But the human mind has its horizon, as well as the organs of vision. The boundaries of nature are extended beyond our reach, and as the laws of matter are too much divaricated for its complete investigation, it becomes us to remain satisfied, if assiduity and the stretch of our mental powers can bring us within the sphere of probability, where mathematical demonstration, or positive proof, cannot be obtained.

"If we attend to all the particulars above recited, I presume, we shall find but little room to doubt that electric matter forms a constituent part of the human system; and, when we consider its very active nature, and extreme subtilty, we must admit, that great obscurity will inevitably attend many of its operations, but that it is of great importance, if it really forms a constituent part of the human system, to discover the means by which it is introduced into it—also its modes, and degrees of combination and evolution, with their several causes, should be investigated as far as possible, by the medical faculty: and till they are in some measure attended to and understood, we shall continue to wonder at the phenomena they produce, shall frequently ascribe them to false causes, and must therefore often be very erroneous and unsuccessful in our modes of application, for the removal of many diseases; and that there really are many, which do now remain the aprobria of all past and present medical practice, I presume I need take no pains to evince to you, as it has often been publicly acknowledged by the sage, the truly ingenious, and ingenuous professor of the practice of medicine in this university.

"It is very observable, that a frequent application of food is necessary to support the human body in a state of vigour

through all the different stages of infancy, youth, manhood, and old age. The articles of food are extremely various in their nature; some of them seem to possess two distinct properties, one of which, by being fitted to nourish the fluids, enables them to support the solids; and the other seems much better constituted to support nervous energy. With respect to the processes by which these effects are produced, they are indeed, at present, involved in much obscurity, and every attempt to investigate them will probably be attended with many mistakes; but I am disposed to hope, that perseverance, and repeated corrections, may do much towards placing the matter in a tolerably clear view, and thus render the human judgment a far better agent than it is at present, for administering to the comfort and happiness of our species.

" Under the influence of this idea, I shall now venture to throw out some conjectures respecting the nature and mode of operation of the various articles of food.

" I think it highly probable, that every distinct substance in nature possesses a portion of electric matter, which is peculiar to itself; or, in other words, that it has chemically combined with it a certain quantity of electric matter, by which, if I may be allowed the expression, it is as it were exactly saturated; and, as it changes its nature by means of chemical attractions or decomposition, its prior quantity of electric matter is diminished or increased, according to the manner of its changes; and hence, when different substances, taken into the body, are decompounded by the digestive process, and their component parts form new affinities, a portion of the electric matter which they primarily possessed may be evolved into the system, and employed in invigorating its animal spirits, whilst other portions of it, forming a constituent part of the chyle, may, with it, enter the blood in a state of chemical combination, and afterwards be secreted by the brain in its passage through it, and be diffused by that

organ through the nerves, as being the best conducting parts of the animal system.

" I also think it not improbable, that it may often be combined with other very subtle matters, that may retard, accelerate, or otherwise vary its modes or degrees of operation on various parts of the body, and subject it to a particular influence from various substances, internally or externally applied to it.

" In support of these opinions I must observe, that those substances which are found to be most nutritious to the animal system, generally contain either much gelatinous matter, or much of the principle of inflammability, as is easily observable in animal fibres, fats, vinous spirits, fermented liquors, &c. and thus some of them may contribute to support the body, by restoring its wastes and decays, and others more immediately renew the powers of the mind; and, when taken in excess, excite in it an inordinate and irregular degree of action. It is, I think, natural to conceive that these substances may, by various means, each be contaminated, and may thus become both, in different ways and degrees, improper subjects for nutrition; giving out other matters, or other proportions of them, in the process of digestion, than what may be consistent with the health of the body. For I consider health, as the result of a balance of powers; but admitting of a very considerable latitude, before injury is sensibly perceived to take place, either in the functions of the body or the mind.

" Some years back I amused myself by endeavouring to account for the sudden metastasis, often observed to take place in the gout; and was led to suspect that both gouty, and other pains, might often depend, in some degree, upon either a depraved state, or quantity of electric matter in the system. I sometime afterwards had the following opportunities for experiment, which I embraced; and now solicit

your attention, whilst I faithfully and particularly recite them.

"A gentleman of my acquaintance was seized with the gout in both his great toes; he had confined himself to his bed about two days, when I first saw them. I took off the flannels in which one of them was wrapt, and begged that he would give me leave to lay a bit of bees-wax, about the circumference of a shilling, upon the joint affected; he submitted to my request, but in less than two minutes he complained that the part became extremely hot; I endeavoured to divert him from such an idea, and begged he would permit the wax to remain; he did so, but in a few minutes more, said that the heat became too intolerable to be borne. I removed the wax, lapped the foot up as before, and put it into bed; I then asked a lady in the room to favour me with a silk ribbon; I obtained the object of my request, and after having held it to the fire for some time, to make it perfectly dry, I begged of the gentleman to let me see his other foot; he put it out of bed; I took off the flannels, and lapped the ribbon round it as loosely as possible. I then put on the flannels as before, and replaced the foot in bed, begging that he would permit the ribbon to remain on until I should see him again, which I promised to do in an hour and an half; he assured me he would comply with my solicitation; I left him, and returned in the time mentioned, but no sooner had I entered the room than he reproached me, in very strong terms, and said, I had caused him the most excrutiating pain he had ever felt; I expressed a degree of surprise at the charge, and begged that he would explain to me how I had injured him; he said he did not know how the effect was produced, but observed that the foot upon which I had put the ribbon very soon became extremely hot, and was attended with shooting pains, which he submitted to for about half an hour, when, being unable to bear them any longer, he ordered the ribbon to be taken off, and he then assured me, that upon that foot

the gout was got up into the ancle. I examined it, and found it inflamed; I begged that he would permit me to apply a bit of tin-foil to the part, and assured him that I believed that he would not find any inconvenience from it. He submitted with reluctance; but after the metal had continued on for some time, he thought himself much eased by it. The part underneath the foil became very moist, and the inflammation was apparently much abated.

"A young lady of my acquaintance, during the last stage of a tabes mesenterica, complained of a violent pain, which shot down from the cervical vertibræ to her right wrist. The pain usually began about eleven o'clock in the forenoon, and four in the afternoon, and continued each time about one hour. I desired that she would give me leave to put a bit of metal round her arm. She consented, and I applied a bit of rolled tin, about the middle of the humerus; at the two next periods of her attack, the pain descended as far as the metal, but no farther. I afterwards took it off, and at the next paroxysm, the pain descended to the wrist as before: she requested that I would apply the metal again; I did so, and on the return of the pain, it did not extend farther than the metal, as before. Encouraged by this degree of success, I entertained a hope that by connecting another piece of metal, extending from that upon the arm to the cervical vertibræ, the whole of the pain might be taken off; I made the trial, but without any sensible advantage, for the pain continued to extend to the arm, without any perceptible degree of mitigation.

"A friend of mine, in Warwickshire, after complaining for some days of slight pain in the region of the kidneys, a sense of heat in the urethra upon making water, and a loss of appetite; called to his assistance an eminent physician. The doctor at first apprehended the affection to be a nephritic one; the patient found but little, or no benefit, from the medicines administered. In a few days fresh symptoms took place, which

caused the physician to change his sentiments respecting the nature of the disease, and he then termed it a lumbago. Various applications were made, but without any sensible advantage; various hypochondriac symptoms came on, flatus, lowness of spirits, frequent perspiration about the precordia, and in the palms of the hands: on going to bed, he every night felt an uneasy sensation of heat upon his back, and a creeping, as he expressed it, which was so troublesome as to prevent his sleeping during the night; these sensations usually went off about six o'clock in the morning, from which time he commonly slept till near nine: when he awoke he was but little refreshed, was languid and dull through the day, but did not complain of any pain; his pulse was a little irregular, and rather low, his tongue clean, and belly bound; his urine was rather small in quantity, stimulating to a frequent discharge, was not changed in its colour, and did not depose any sediment. When the uneasy sensations in the patient's back had continued about a fortnight, he requested my sentiments concerning them. I suspected they might be the effects of an electric matter, that had not a proper means of escape from the body; and observed to him, if my own situation was similar with his, I would try the application of a metallic substance to the part. By my direction, he obtained a strip of thin rolled silver, such as is commonly used for plaiting buckles, &c. Its length was sufficient to go round his body, and its width about three inches; a bit of flannel was sewed upon each edge. This instrument was seen by the physician, and smiled at as a ridiculous application; but as he acknowledged it could do no injury, is was applied all night, during which time the patient did not feel any of his former sensations: he slept well, and arose in the morning very much refreshed: the doctor however refused to admit, that the metal had had any influence in producing these effects, and ascribed them to the patient's former fatigue. The metal

was applied the succeeding night, and ease and comfortable sleep ensued as before. The doctor still continued to assert, that the metal was a ridiculous application, and said that he had no doubt if it were laid aside, that the same circumstances would take place as when it was applied to the body. The patient submitted to the trial the ensuing night, but had a return of the sense of heat, creeping, and want of sleep, to as great a degree as before the metal was first applied; he resolved, therefore, to yield no more to the doctor's request of laying it aside. He applied it again for several ensuing nights, when ease and sleep uniformly accompanied its application, until by the flexures of the body, the edges began to break, and starting through the flannel gave him some uneasiness. I desired it should then be laid aside, and that his back should be bathed with tepid water every night before he got into bed, expecting that it would act as a conductor and relaxent to the skin, and, by those means, produce the same beneficial effects as the metal had before done; and in this expectation I was not disappointed. About a week after we took a small journey together in a post chaise; the first afternoon we travelled only fourteen miles: in the evening he expressed a concern that he could not, at an inn, conveniently get his back bathed. I offered him my assistance in that particular; he gladly accepted of it, and at bed time called for a bason of warm water, and a bit of soft rag; they were brought, and my friend then took off his coat and waistcoat, and drew up his shirt: there was not the least appearance of disease upon his back. I bathed it equally for about a minute or two, when I observed two spots, upon which was a change of colour; they soon became very red. I was surprised at the appearance, but was silent respecting it, until I had inquired in what part of the back he felt the sensations he had before complained of? He put his hand behind him, and laid it first upon one and then upon the other, of the places that had changed in their colour. The patient

was not benefited by the excursion we were then upon, but soon after our return home he went to Buxton, bathed, drank the waters, and rode upon the neighbouring hills daily for near a month, and then came back to his family in tolerable health.

Reply of Mr. Lowndes to Mr. Calderwood on his Communication on Medical Electricity.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—In the last number of your valuable and scientific work, I had the honor of being particularly noticed by Mr. Calderwood; and as Mr. Calderwood and I differ entirely in the principles of our reasoning, the conclusions we draw cannot accordingly meet in unison on the subject of electricity.

I agree perfectly with Mr. Calderwood's maxim, that any active remedy, in proportion as it is capable of doing good, is also capable of doing mischief. This being granted I shall proceed to shew that the size of my machine as I contend for is the great and leading point on which the success of electricity, in the cure of diseases, depends. The principle on which Mr. Calderwood sets out, is that electricity acts entirely by its stimulant operation. If this were the truth, every stimulant acting with the same degree of operation would be equally successful in the cure of diseases; but we find even in the case Mr. Calderwood adduces for the success of electricity in his own hands, that other stimulant and active plans were resorted to without any effect. Were stimulus alone wanted, a small machine might certainly in most cases answer every purpose and give shock sufficient to have an influence on the morbid action. But contrary to Mr. Calderwood's sentiments, I contend that electricity is a peculiar matter, the stimulus of which is only a secondary point; that this matter is analogous to that secretion which

is supposed to give power and sensation to the nervous system, and that the quick supply of this matter to parts, where they have lost their energy in consequence of its being deficient, is the great principle that constitutes the cure. If this principle is just, a quick accumulation of this matter, Mr. Calderwood will perceive, can only be made by a large machine. It is not my practice to operate much by shocks, nor have I seen much benefit from them. I have tried machines of every description and size, and what I have stated in regard to this essential point is from a long and extensive experience. I hope Mr. Calderwood will be satisfied; I allow him every merit for his treatment of the case he has published, and though we differ in principle on this subject, we both agree in the wish of being useful by our observations to society. I am,

Gentlemen,

St. Paul's Church yard, Your obedient humble Servant,
Feb. 19, 1809. F. LOWNDES.

On the New Chemical Nomenclature, as adopted in the Specimen of the College Pharmacopœia.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—The profession anxiously look for the New Pharmacopœia of the College, which has been so long under the inspection of that respectable body. In the specimen I have seen of that work, circulated through the members, there is a circumstance which does not seem to have struck them, but which would certainly be highly useful to prevent mistakes. The College have very properly adopted the latest chemical nomenclature. Chemistry may be termed a revolutionary science, which has been shifting its terms so frequently, that mistakes are very apt to arise from this source. There are at present three stages of nomenclature; the *old*, the *modern*, and the *very modern*. It would be

highly advantageous that each article in the most modern term should have appended to it the other synonymes. The mistakes of one substance for another, the College cannot but be aware, may be attended with the most dangerous consequences, and they must likewise know, that the older part of the profession find it difficult to unlearn the lessons formerly taught them. Such a simple addition would do much for the benefit of the public, as well as relieve from much perplexity many who, though well acquainted with the steps they ought to pursue, may be in danger at times of mistaking the proper instrument that ought to be employed. This is merely hinted by one who, though a well-wisher to every improvement, thinks no sacrifices ought to be made or lives endangered for the parade of Chemical purity in diction. I am, Gentlemen,

Your obedient Servant,

Haymarket, Feb. 16, 1807. AN OLD CHEMIST.

ON THE USE OF ALKALIES IN MEDICINE.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—The use of alkalies has lately been extended in practice, and the principle of it is certainly founded on accurate observation. The fluids of the stomach are, in their natural state, neither acid nor alkaline; but when the derangement of this organ takes place, they evidently partake of an acid tendency, which occasions new arrangements to be formed, and the natural chylifactive process to be interrupted. This state occurs in most diseases; and though the use of alkalies is by no means to be held out as general remedies, yet they will be found in a high degree to palliate those symptoms of irritation in the *primæ viæ* which tend either to continue or aggravate the original affection.

In the complaints of children, they have long been considered as highly beneficial; and from this circumstance, a theory of the diseases incident to that period of life was founded; but though this reasoning was erroneous in not making a distinction between the actual diseases and the symptoms merely of the *primæ viæ*, their good effects as palliatives cannot be disputed. The practice introduced by Harris has therefore been continued to the present day, though his reasoning is laid aside.

In the diseases of women, the same state of the *primæ viæ* exists as in childhood. A disengaged acid appears on any irritation of the *primæ viæ*, and the use of alkalies is therefore found beneficial, not as specifics for the disease, but as correctors of uneasy symptoms occupying this situation, which continue it or aggravate its violence.

The same may be said of gouty habits, in whom a similar derangement of the stomach occurs, and an attention to the use of alkalies becomes here generally useful and necessary.

In venereal complaints, also, where an excess of oxygen is introduced by mercury into the system, and the solid passes into a state of ulceration in different parts, alkalies form the only remedy against such ravages. They require to be largely used, and the vegetable alkali is the most successful.

In scrofula, alkalies are no less specific. In this habit, a state of incomplete animalisation occurs, and this state of the stomach prevails where a disengaged acid is conspicuous. Though alkalies are here so useful, I do not mean to say that the disease depends on this predominant principle. All I contend for is, that as a symptom of this imperfect animalisation, there prevails in scrofula a derangement of stomach and bowels connected with a predominant disengaged acid; and that the relieving this symptom, if it does not cure, by taking off a source of irritation existing in so im-

portant an organ, yet forms a leading step towards it. I consider, therefore, an extensive use of alkalies as of material service, and they are, perhaps, better employed in the carbonated state than in any other.

I shall, if the above remarks are worthy of insertion, proceed farther on the subject. In the mean time,

I am, Gentlemen,
your obedient servant,

Exeter, Feb. 10, 1809. S. T.

ON THE BEST MEANS OF PROMOTING SUPPURATION IN TUMOURS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—To apply means equal to the effect required, is the great and successful principle that ought to direct our practice. These means seem to fail more in surgery than in medicine, and in the case of tumours it is often a most tedious and perplexing circumstance to bring them to suppuration. It is the rule with the first surgeons to trust generally to the common poultice; as the action of this remedy depends entirely on its degree of heat, it is clear that the moment that it loses its increased temperature at that moment it loses all its influence in promoting suppuration. Besides the teguments can only bear a certain degree of increased temperature, not so high as is really sufficient to produce a quick change on the first stage of inflammation in the part. The loss of heat in the poultice occasions it to lie an useless and hurtful mass on the tumour, and from its coldness rather to retard, than hasten the process for which it was intended. To obviate this circumstance it has been usual to cover the poultice with some stimulant applications, as gum galbanum, a little camphor, mustard flour, &c. But such stimulants, however proper in their principle, I contend, are not sufficiently

penetrating to answer the purpose, and at the same time they they give much pain and much irritation. Instead of this practice for the maturation of indolent tumours, I would propose substituting the use of some of the cheaper essential oils. They possess a all sharp, acrid and burning taste. They are of a deeply penetrating and powerfully stimulant nature, so as in their concentrated state, to act even as caustics. In blending them as maturants, they should be blended in a certain proportion with some of the unctious plaisters, but not in that proportion as to lessen or destroy their full influence. The most useful and the cheapest, I have found to be the oil of pepperment, and this application, I have experienced the most successful in many tumours of the most indolent nature.

The form of a plaister is also for the patient a more convenient one than a poultice. Camphor has been a substance much applied as a maturant, but this substance is not readily dissolved, neither does it act in the same complete and imperceptible manner as the essential oils. The subject is one which comes so often under the care of the surgeon, that too much attention cannot be paid to hit on the most effectual means to bring them to a speedy and effectual issue. Modern surgery is in pharmaceutic preparations often too inert. The principle of trusting to the powers of nature in the change and renovation of parts has been carried too far, and though a proper rule to lay down, it admits of more exceptions in the class of tumours than in any other local diseases.

Every one acquainted with this subject will concur in it. The class of tumours is more extensive than any other class of local diseases. They are divided into two kinds, the acute and chronic; but this division is not sufficiently minute to lead to an acquaintance with their real nature. Mr. Abernethy has properly formed a more scientific division, which approaches a step nearer to what is wanted. The best arrangement would be one formed from the particular kind of

structure affected, as discovered by dissection, because the term would then explain both the morbid change, and also point out the mode of treatment to be adopted.

How often do we see Aneurism mistaken for a tumour of another description, even by surgeons of experience; and how often has schirrus of the testicle been mistaken for simple hydrocele. These are proofs how imperfect is our knowledge of this class of diseases in their proper diagnostics; and consequently how deficient must, in many respects, be our treatment.

I am, Gentlemen,

Your obedient servant,

AN HOSPITAL SURGEON.

London, Feb. 10, 1809.

On the Neglect of the Medical Police in regard to the Situation of the Public Buildings of the Metropolis, occasioned by the late Fire at Drury Lane Theatre.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—THE frequent and fatal accidents which have lately spread terror through the metropolis and its vicinity, by the destruction of so many places of public fascination by fire, call loudly for the interference of the legislature to prevent as far as possible the dangerous and extensive evils which are apt to arise from the casualties to which such places are unavoidably more than others subjected. The first circumstance that must naturally strike every one in the way of precaution is this—they should be built in a separate or insulated situation, unconnected with any edifices or buildings, having the avenues to them spacious and free. However valuable the property of ground may be in London, no expense should be spared where the public safety is so materially concerned.

Another advantage attending an insulated and spacious situation is, that such a construction of the edifice can take place as may best ensure the preservation of health. One-third of the deaths of the metropolis may be dated from colds caught at places of public amusement, or from the vitiated and unwholesome atmosphere breathed in such situations. To be kept for a length of time in the stewing heat of a crowded playhouse, bathed in constant perspiration, and then suddenly exposed to the chilly damp of a winter night, is more than most constitutions can bear. No wonder that the young and the gay, who are so much the frequenters of these scenes, are so quickly cut off. Indeed it is almost impossible that those with weak lungs can escape. The sudden check to the fluids on the surface repels their circulation internally, and accumulates it in the lungs, while those organs, accustomed for some hours to draw in a heated and unwholesome current of air, loaded, in the languge of chemistry, with azote, as suddenly are brought, on getting out of doors, to inhale a cold oxygenated fluid, disposing them strongly to inflammation. This change of temperature, joined with their accumulated circulation, immediately begins the pulmonic disease which too often proves fatal. Nor are the victims of such rashness rendered wiser even where they escape. The giddy round of pleasure still attracts them to the fatal gulph of disease, and they generally fall victims to a second or at most a third attack of what they term a cold caught at seeing some favourite piece.

But, independent of cold, public places, in the confined situations in which they are built, in this metropolis, are too often visited by the seeds of febrile contagion; and from these seats of amusement the fatal poison is inhaled, which saps the principle of life and enjoyment. It is from a consideration of these circumstances that the situation, structure, and regulation of public places, I contend, should form a sub-

ject of the first importance. The public interest, not the emolument of individuals, should be the first object, and to that, every thing else should bend. The legislature, with proper advice, should direct every thing respecting these points; and it would be well if the same attention were paid to the subject as is done on the continent, where public amusements are an object of the regulation of government, and are not left to the caprice of individuals.

These hints, I flatter myself, will not be lost. All the accidents from pressure and crowds, as well as the predisposition to disease, from improper or neglected ventilation, would be then avoided.

I am, Gentlemen,
Your obedient servant,
MEDICUS POLITICUS.

Feb. 25, 1809.

ON THE MEDICAL EFFECTS OF PHOSPHORUS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—For some time past it has been much the custom to adopt German medicine as well as German literature and morality. The plays of Kotzebue have sapped the foundations of female virtue in this country, and the writings of several of the German physicians have led to wild and speculative remedies in practice, the action of which is founded entirely on chemical theory. One of the most powerful and dangerous of these is the well known substance we term phosphorus, which may be considered in no other light than as *liquid fire*. It combines, it is well known, with oxygen at the lowest temperature: and when exposed to atmospheric air, it emits a white fume of a fœtid smell, and is highly luminous in the dark. With these strong similarities to *fire itself*, its qualities as a medicine must be of a more

than phlogistic nature; and, however in combination its powers may be modified, so as to form a constituent principle of the more solid parts of the animal machine, in its pure state it is the most powerful agent that can be employed to destroy it. It has been represented by the German physicians as an instrument of such powerful animal excitement as to recall the fleeting breath as it passes through the lungs, performing respiration in its last struggles. It produces, we are told, by its action, an universal heat and glow, and quickens the pulse, rendering it at the same time full and strong; but it is added, that it is one of those rapidly exciting agents, which is only safe where the vital powers are extremely low; where the functions of nature are, as it were, altogether suspended; and where every chance of recovery is past. Hence it is strongly recommended in the last stage of typhus, where involuntary stools and urine have come on. In such cases I have several times seen it tried, but not with the success or marvelous effects which the German physicians declare.

One of these cases was with my respectable friend Dr. Garthshore, who, zealous in the pursuits of his profession, and anxious to give every scientific practice a fair trial, prescribed it in a case of the last stage of typhus, attended also by Messrs. Mainwaring and Jones. The first exhibition of it roused the patient, and gave a short-lived and deceptive appearance, which immediately afterwards was succeeded by a more gloomy relapse; and the patient did not long survive. Since that time I have witnessed the same result in several other instances. It is clear that this remedy can only act by exciting inflammation, and the inflammation it excites is of that very active and overwhelming nature, that a very short period completes its triumph over the unhappy patient. Hence even its German panegyrists observe, that where it is improperly used, the worst consequences have attended its

administration. Balancing, then, the injury arising from what is termed its improper use, and the uncertainty of its permanent benefit in cases where it does really apply, it is a medicine which I think ought to be wholly discarded. We have mischievous remedies enough in this country, without the Germans teaching us to swallow *liquid fire*. I observe the phosphoric acid and ether is prescribed in certain cases of impotency by Mr. Roberton of Edinburgh. Perhaps future and more enlarged experience will make him abandon this *highly prized* specific.

I am, Gentlemen,

Your obedient servant,

CLINICUS.

London, Feb. 10, 1809.

Communication on Medical Education, by Dr. John Reid, Licentiate of the Royal College of Physicians, and late Senior Physician to the Finsbury Dispensary.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—The success with which you have developed the artifices of empiricism, entitles you to the gratitude as well of the medical profession as of the public at large, but to cleanse the accumulating filth of this Augean stable is a labour that the legislative power only can ever hope to achieve. Many other professional abuses, however, call loudly for reformation, nor do I conceive that the "Medical Spectator" can be more usefully employed in its censorial capacity, than in bringing some of these fairly before the public, and in suggesting such expedients for their removal, as a due consideration of them will necessarily produce. That the general routine of Education usually pursued by medical students is radically and essentially defective, few will be disposed to deny. It is indeed a lamentable, but an undoubted fact, that among the numerous students that an-

nually resort to the metropolis for the acquisition of medical knowledge, very few are properly prepared by scholastic acquirements for the reception of that information which is the object of their pursuit. If to one class of men more than another, a liberal education, an enlarged understanding and a well cultivated mind, are indispensably requisite; If in one station of life more than another, urbanity of manners and an intimate acquaintance with the human heart, are absolutely required; surely those who are engaged in either of the departments of the "healing art," ought in an eminent degree to possess these necessary qualifications. How then does it happen that young men designed for the practice of Surgery and Medicine are often so miserably deficient? Is it true, persons in a sphere of life where the cultivation of literature is less attended to, introduce their sons to the profession, or does it arise from the necessity that exists of removing early from school a boy destined to the drudgery of pharmaceutical preparation for the next seven years? To the latter of these causes, I think the evil is in general to be attributed. A youth at the age of fourteen is taken from school and placed behind an Apothecary's counter. There the mixing of potions, powders, &c. probably occupies most of his time. The Pharmacopœia is perhaps given him to study, and in due time he is initiated into the mysteries of bleeding and tooth-drawing. In the course of his apprenticeship, he will most likely collect a few empirical ideas respecting the efficacy of medicines, and will perhaps learn to make a suitable application to a sore. He may even by some lucky chance attend a pauper in a fever, and after much ineffectual search be fortunate enough to discover the pulse, though certainly without knowing the distinction between an artery or a vein. Curiosity may sometimes induce him to take up a "system on anatomy" or "Cullen's first lines!" but the alphabet of every science is dry and uninteresting. He feels the want of a classical key, and is soon disgusted

with names, phrases and descriptions that to him are incomprehensible. Confinement is always irksome, but particularly so at that time when the mind begins to expand, and the youth feels himself become a man. He therefore naturally looks forward with patience to the day of liberation, and fondly fancies that liberty includes every enjoyment that human nature is capable of tasting. A new scene now opens to his view. He arrives in London, enters at the Hospitals, and is expected in the course of six or twelve months to make such a proficiency in anatomy and surgery as will enable him to pass an examination at "the Hall," which is held out as being the grand object of solicitude. But here again obstacles occur to impede his improvement. Released so recently from restraint, and transported at once from perhaps an obscure country district to the centre of the metropolis, without experience to guard or discretion to direct him, can we wonder if the blandishments of pleasure induce his attention from the sober path of professional duty, or that stimulated by the example of too many of his associates, and attracted by the novelties with which he is surrounded, his attendants should be lax and irregular, and his mind become dissipated and unbent. Grant however, that from lectures, dissections and hospital practice, a general outline of useful knowledge is gleaned. The ordeal of examination passed, and the student thus fledged, ready to take his flight into the country, there to erect his standard as a licensed destroyer, or perhaps having procured an appointment, is dispatched to tamper with the lives of our soldiers and sailors, which at the present juncture are so valuable both in a political and pecuniary point of view. If this picture be not overcharged, (and for the correctness of it I can confidently appeal to every man who has had opportunities of making observations on any of our modern schools,) it only remains for me to inquire ought these things to be? Is an apprenticeship necessary, or even desirable as an introduction

to the medical profession, and ought not some system of instruction to be formed and *enforced* to insure it from being invaded by incapable and unworthy members? Without a classical education, no pupil should be admitted, and grammars of anatomy, chemistry, &c. might easily be compiled for the use of such boys while at school, as were intended for the different departments with which those sciences are connected. If the dispensing of medicines *cannot* be altogether omitted, a youth from the age of sixteen to eighteen might be employed. The present mode of Hospital attendance requires a complete revolution, and might with advantage be placed upon a footing somewhat similar to that at our universities. A certain sum of money should be paid on entrance, and a certain course of study be laid down from which no pupil could deviate. To this plan, three years at least should be devoted, and a rigid examination should then take place in each particular branch of science, and those only who should be found in *every respect* competent, should be allowed to practise. These desultory hints, hastily thrown together, are submitted to the candour of the Editors, with the hope that they may excite the attention of men better informed on the subject, who may have the wisdom to suggest, and the power to put in execution some permanent plan for the better regulation of medical instruction.

I am, Gentlemen,

Your obedient servant,

Greville Street, Brunswick Square. JOHN REID.

MEDICAL INTELLIGENCE.

Accounts from Brazil state, that the vaccine inoculation, first practised in St. Salvador, towards the close of 1804, has since been spread through all the provinces, by the orders of the Prince Regent. His royal highness appointed Dr. J. A. Barbaso to superintend and promote the new practice; and so beneficial have been its effects, that the small-pox, formerly very destructive there, has totally disappeared.

A species of wasp which builds its nests in trees has lately been observed in various parts of this country, and was frequently met with during the last summer in different parts of the West Riding of Yorkshire. It appears to be a new introduction, and is supposed to have been brought across the Atlantic into some of the ports on the western shore of the island, and is gradually introducing itself through the country. The trees on which the nests have been most frequently observed, are the gooseberry and currant, and an instance of it has been met with on the common elder, to which insects in general are averse. This species is smaller than the common wasp, but it is much less voracious, and less easily irritated.

An improvement on obstetrical instruments has for some years been introduced in his private practice by Mr. Mainwaring, which is of considerable importance. In those unfortunate cases of distortion, where a diminution of the child's head is unavoidable to permit delivery, the instruments commonly in use are the long scissars and crotchet, or blunt hook. The latter is perhaps an unnecessary instrument. Mr. Mainwaring has, with much advantage and simplicity, conjoined the two former instruments into one. This instrument is a pair of long scissars completely blunt on all sides, except at the points, at a small distance from which are placed two projecting points or stops. When the perforation of the head takes place to the full extent, and the evacuation is made, which can be all done with the same instrument on expanding the blades to a certain extent, the stops take a firm hold of any projecting parts of the bones of the head in the same manner as the crotchet, and are not so liable to slip as that instrument, neither of slipping from their blunt surface to do injury. The slipping of the crotchet is always a dangerous circumstance, unless well guarded by the hand of the operator, and even the withdrawing one instrument after perforating and employing another, is attended with inconvenience, and much delay in the delivery. On these accounts we hope the projector of this improvement will make it generally known, and state the particulars of his own experience with it.

Another extraordinary instance of abstinence at present exists in North-Wales.—This extraordinary being is also a woman, named *Mary Thomas*. She is now of the age of 84 years; 63 of these she has been confined to the bed; and during this long period has lived nearly without eating or

drinking. For ten years, about the middle of this long term, she was supported absolutely without food of any kind; then lying in a torpid state, unconscious of her own existence. In 1807 her *ingestæ* were confined to one ounce of bread and a glass of water in fourteen days; and this was invariably rejected from her stomach in a few minutes after being taken. Under this extended period of abstinence she is reduced to a breathing skeleton. An eminent artist, Mr. James Ward of Newman Street, has in his possession an admirable sketch, unique in its kind, of this being, taken from the life by himself. It is superfluous to observe how much philosophers and physicians would be gratified by an etching from this curious portrait, executed with the truth and spirit its possessor is capable of giving to it; and accompanied with such authentic facts, as Mr. Ward's knowledge of the woman can supply.

By the Report of the Small Pox Hospital, it appears that the discontinuance of Inoculation for Small Pox has by no means checked the casual disease, and that, on the contrary, the mortality from Small Pox has increased from an average of 42 in April and May, to 141 each for the months of October and November. This proceeds chiefly from the dislike of many to the practice of Vaccination. The following is the statement of patients, and the result of their cases from January to November.

	In-Patients.			*Out-Patients,*		
	Small-Pox.	Inoculated.	Vaccinated.	Vaccinated.	Inoculated.	Deaths by the Small-Pox, as reported by the Bills of Mortality.
January - -	7	21		32	67	174
February - -	9	19		40	96	102
March - - -	9	29		101	190	89
April - - - -	4	36		113	484	46
May - - - -	4	25		214	196	39
June - - - -	15	16	1	117		51
July - - - -	14	10	2	53		92
August - - -	3	10		105		78
September -	6	20		156		103
October - -	10	23	3	159		96
November -	24	29		114		167

Dr. John Reid, we are sorry to understand, intends discontinuing his Monthly Reports of Diseases. The advantages of such reports, we are of opinion, are very great for the information of practitioners; and we should wish to see them extended in the manner pointed out in a former number of this work.

LECTURES on the THEORY and PRACTICE of MEDICINE, by Dr. REID, Member of the Royal College of Physicians, late Senior Physician to the Finsbury Dispensary, &c.

The Course will comprise Thirty-five Lectures,

The Lecturer conceives that this number will afford sufficient scope for that extent of acquisition which is requisite to lay a foundation for the attainment of practical knowledge.

The science of life will be treated of as distinct from, although not independant of, other branches of literary.

The principles of Brown will be explained, and a view taken of other systems which, in the present day, have any claim to critical investigation.

The advantages which have been derived from an application of the principles of modern Chemistry to medical knowledge will be pointed out. Strictures, at the same time, will be made on the unjustifiable degree to which chemical philosophy has been extended, for the purpose of explaining the Phenomena of health and disease.

The high importance of attention to the conduct and direction of the intellectual and moral condition of man, as affecting his physical organization and character, will be stated and illustrated by examples.

The order of the Course will be in a great measure guided by the nosology of Cullen.

A printed Syllabus, including the heads of each Lecture, will be delivered to a pupil upon his entrance in the Course.

The introductory Lecture will be given at nine o'clock in the morning, on Wednesday, March 15, at Dr. Reid's House, where the subsequent Lectures will be delivered, at the same hour, on Mondays, Wednesdays, and Fridays.

Terms of Attendance—For one Course, 2l. 2s. 0d.—Perpetual Pupil, 3l. 3s. 0d.

Further particulars may be learned, by applying at Dr. Reid's House, No. 6, Greville-street, Brunswick-square.

Dr. Ramsbotham will commence his Course of Spring Lectures on the science and practice of Midwifery, at his house, No. 9, Old Jewry, on Monday, the 13th March, at seven o'clock in the evening. Two Courses will be given during the Summer season; the first of which will be commenced

the second Monday in May, at ten o'clock in the morning; each subject of these Lectures is elucidated by appropriate specimens of natural and diseased parts from a celebrated anatomical *collection*.

NEW MEDICAL PUBLICATIONS.

Burn's Observations on some of the most frequent and important Diseases of the Heart, 8vo. 7s. boards.

The Physician's Vade Mecum; containing the Symptoms, Causes, Diagnosis, Prognosis and Treatment of Disease, accompanied by a select collection of formulæ, and a glossary of teams. By Robert Hooper, M. D. small 8vo. 6s. boards.

IN THE PRESS.

Mr. Charles Bell's second volume of his operative surgery, founded on the basis of anatomy, will appear in a few days.

Two highly-finished engravings, the size of nature, one representing the basis of the human brain, the other the cavity in which it is contained; together with two plates of outline to the same, with figures of difference, also a full description of the origin of the nerves arising from that organ, and the openings of the cranium through which they pass. By T. J. Pettigrew, Fellow of the London Medical Society.

The drawings executed from nature by T. Baxter, and engraved by J. Hopwood; the whole under the inspection of John Taunton, Esq. Member of the Royal College of Surgeons, London; Surgeon to the City and Finsbury Dispenearies, City Truss Society, and Lecturer on Anatomy, Physiology, &c. Price 15s.

A system of Surgery. By James Russell, F. R. S. E. 4 vols. 8vo.

TO CORRESPONDENTS.

We are sorry to inform J. C. that we cannot insert his letter on Hydrophbia: it contains too many personalities, and too few facts to deserve insertion. W. D's. hint shall be attended to in our next.—There is nothing new in the mode of operating in cancerous cases recommended by A Constant Reader; *it is known and acted upon by many eminent surgeons of the day.*

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EMPIRICISM.

AS Quackery extends, in a political view, the profession are benefited. The mischief from this source falls to be repaired by scientific hands, and the Quack is the active agent to cut out work for the regular practitioner. Since, then, the predilection to this department of the healing art is too strongly rooted to be erased, and since the revenue drawn from the same source is too strong a temptation to put a stop to this trade against health and constitution, the best plan would be to restrain it within limits of salutary extent by establishing a board of medical inquiry to license these temples of Circæan deception, and for admitting only such articles for sale, the composition of which should be unfolded to the individuals of this board under *secrecy* of not being divulged; and by their authority, if approved of, the nostrum should be admitted to sale. In this way few or no medicines would be rejected; for the individuals composing the board, if they saw any articles of the composition dangerous, or not applying to the purpose stated, as medical men, could advise the substitution of another article in place of it, so that the nostrum would always come forward, and in this way in an improved state as a medicine.

By such a regulation, society would be benefited in a high degree, and even the revenue to government improved. For, as the compositions of the Patent Warehouse would not then be so detrimental to health, the patients would continue the use of them longer, and not so soon fall a prey to their injurious consequences.

The diseases of children open a wide field for the speculations of the empiric, and worms are a never-failing cause to account for every ailment that may attack them. The sale of worm-medicines is therefore beyond calculation, and we shall consider the merits of a few of the principal of these specifics, beginning with the celebrated

CHING'S WORM LOZENGE.

The form of a lozenge is certainly a convenient one for children. As being a sweet-meat, it is easily swallowed, and has the advantage of giving no disgust to the child. Ching's specific is the calomel and jalap made up in the following manner into a yellow and brown lozenge:

YELLOW LOZENGE.

Take of calomel, 1 lb.—White sugar, 2 lbs.—Saffron, half an ounce—Spring water, 1 pint.

BROWN LOZENGE.

Take of resin of jalap, 3½ lbs.—Calomel, 9 ozs.—White sugar, 9 lbs.—Spring water, sufficient to make a mass.

One of the first, or yellow lozenge, is given at night, and a brown one in the morning to work it off.—This remedy, it is clear, is nothing more than the common medicines used in worms by the regular apothecary; and we can make no objection to Mr. Ching's prescription, if proper regard is had to the doses, suited to the ages of the patients. But that a common remedy should be held in this manner as a specific is both ridiculous and dishonest; and that the powers of such a common remedy should be farther vouched by noble, reverend, and scientific characters, shews the imbecility of the

human mind under certain impressions, and that the principles of science do not run through their whole line of conduct, however dignified or learned in other respects they may be. This may, perhaps, be one strong reason in favour of popular medicine, as a more thorough acquaintance with its powers would withdraw from the mind those extraordinary impressions which only gross ignorance can excuse from the testimonies in favour of particular remedies which we every day see brought forward.

DR. GARDNER'S WORM MEDICINE.

THIS is another nostrum, of which such tales are told as exceed even the improbabilities of Baron Munchausen. Dr. Gardner even loses sight of common sense in his narrations, much less has a semblance of probability. The museum of worms, which he has collected to astonish his customers, is in a great part a deception formed for the purpose of pointing out the frequency of the disease, and the great practice he has in that line. They are chiefly made of chickens' guts, which, coiled up in his manner, and suspended, resemble the tape-worm, and may be easily mistaken for it. The idea of worms, as a cause of disease, is a popular one, and persons recollecting how they may have been infested by them in childhood, are very easily made to credit that the same may still exist after they are grown up. Dr. Gardner's medicine happens to be nothing more than a common purging pill; the prescription for which accidentally fell into his way while in the humble station of a soldier in the guards; and considering the pill as a more dignified weapon than the bayonet, he gave up the one, and has continued his warfare on society, we are told very successfully, with the other. The chief ingredients in the pill are jalap, gamboge, and calomel, which require strong bowels in the common doses in which such medicines are exhibited, not to be irreparably injured. Whether Dr. Gardner conceives he has any title to a patent for such a remedy, we shall leave the public to judge.

WORM NUTS.

THIS is nothing more than calomel introduced into this form, and is the same with Ching's lozenge. The same objections, therefore, that apply to the one, affect the other; and if left in a damp place, that the solution of the sugar, or saline matter, in their composition is effected, the calomel acquires an increased activity, which adds to the danger of their use in very young or weakly constitutions.

THE SWISS REMEDY; OR, WORM SPECIFIC OF MADAME NOUFLER.

THIS remedy acquired so much reputation on the continent for the cure of worms, particularly the tape-worm, that the secret was purchased by the King of France, and published for the benefit of society. It was then found to be the powder of the male fern, which, possessing some tonic and aromatic qualities, by strengthening the bowels, would tend to destroy the disposition to worms. The exhibition of the powder was followed by a drastic purge at intervals, and a perseverance in this plan for some time generally effected a cure. The principle of this medicine was certainly a proper one—the keeping it a secret as a specific constituted the imposition.

With these remedies of the Patent Warehouse for the use of worms we shall contrast a few of what constitute the specifics of regular practice.

COWAGE.

THE cowage, or a West India remedy, was first made generally known by Mr. Chamberlayne, whose treatise on this subject shews the success of this medicine in a very convincing manner. We consider it as, perhaps, in its operation, the safest of all the anthelmintics by acting entirely in a mechanical manner, and thus removing the very nidus or bed in which such insects are generated.

FILINGS OF TIN

Are an old remedy acting on the same principle of mechanical attrition, and have been equally successful in dislodging worms as any other.

INDIAN PINK

Is an American production. An infusion of the root is a specific for worms. It possesses tonic and narcotic powers, so that the principle of its action is easily understood. For the same reason, all bitters possessing something of a narcotic property will be equally successful.

Lime-water and oils operate differently: the former is a certain specific against the ascarides, and acts both as a poison to them, and decomposes the mucus or slime in which they are inclosed. The latter is a poison to the smaller worms, as well as to many other species of insects.

REGULAR PRACTICE.

I. MEDICINE.

DOCTRINE OF TEMPERAMENTS.

It is a common observation which a practitioner daily hears his patients apply, that such a person, accustomed to attend them, is better acquainted with their constitution than another. This is certainly pointing out in other words the advantage of experience; but, in the language of medicine, it goes farther—it includes a proper acquaintance with that temperament or habit of body, by which one individual is distinguished from another. The doctrine of temperaments is one that ought to form a leading foundation in practice. On this subject much has been written by physicians; "and the more," says Dr. Ferguson, "I think on this subject, the more I am impressed with its importance, and I find that the most celebrated physicians have been of the same opinion. When the theory and practice of medicine are established upon a

sure foundation, which can only render it eminently useful to the physician, the doctrine of the temperaments will be no longer imperfect, unintelligible, or embarrassed; the light thrown upon the one will be reflected by the other. I shall now offer a few observations for your consideration: Cullen, and all the modern writers upon this subject, consider the nervous power as modifying the temperaments of men, and upon its state depends the state of all the other parts. The brain is the organ which is the seat of nervous power and mental action.—It is acted upon by our sensual motions, and its own functions, which give sensation and motion to all parts. It appears, therefore, that all our motions are derived from the action of the brain, which is peculiarly organized for the purpose, and which communicates a contractile power to the muscular system. This contractile power is the principle of all animal motion. It is excited into action by desire or aversion, which is termed volition. If our pleasures and pains depend upon the imagination, certainly our volitions are much connected with it; and some are of opinion, that judgment, memory, and reason, are only modifications of this. "The imagination perceives, reasons, judges, penetrates, and dives into things. The finest, the greatest, and the strongest imagination, is therefore the properest for the sciences as well as arts." What would the man of science, the orator, or poet, be without it? A certain quantity and strength of it are necessary for the comparing the analogy or resemblance of ideas. The power of the imagination in marking the various relations of the qualifications useful to ourselves and others, gives occasion to volitions; therefore, the operation of the imagination in marking the fitness or unfitness of things, and difference of this operation, with a quicker or slower perception of relations, are the distinguishing characters of the temperaments of men. It appears, therefore, that the temperaments depend upon the condition of the imagination, which condition is different upon certain occa-

sions in the same person. The facility of renewing our ideas, and the degree of reflex sensation, or pleasure and pain attending them, are owing to the state of the imagination. Is it not by the imagination that we can combine our ideas; that we can acquire sensations of relation; that our ideas are renewed by our memory; that we can compare our ideas; and that our sensations are modified?

"Imagination is the chief faculty employed in description, invention, and persuasion, and in forming the various opinions by which mankind are governed. These opinions or imaginations are confirmed by habit; and when erroneous, are not corrected even by experience. He that has most imagination, ought to be regarded as endowed with most wit and genius." There are certain conditions of it necessary for the formation of orators, musicians, painters, and poets, and a different condition for the philosopher.

"Although the imagination be weak in some, yet it is very impetuous and quick in others, especially in young persons, where it requires to be bounded by study and experience; it seems also to be dependent on the energy of the brain, organs of sense, and excitability. Is it not evident, that where the imagination is strong, there is vigorous excitability, vivacity, understanding, and knowledge? Persons of this temperament have large brains and strong nerves; they are, however, very liable to be affected with particular pains and stimuli. The sanguine and choleric temperaments of the ancients seem to be varieties of this. The opposite of the above temperament is attended with a dull imagination; the brain is small, and the nerves slender. This agrees with the phlegmatic temperament of the ancients; the excitability is languid, ideas are defective, and the judgment weak. Persons of this temperament are more able to bear fatigue and hardship of every kind, than those of the quick temperament. Of these two we may consider all the temperaments to be

formed, those of debility, as well as those of strength, the sanguine, the melancholy, the phlegmatic, and choleric.

" We may consider the strength of the system to be regulated by the functions of the brain; for where there is a quickness of imagination, there is a facility of performing voluntary motion, a stronger energy of the brain, and a more vigorous excitability, or that facility of muscular contraction, termed irritability.

" I perceive Mr. Humbold thinks it " highly probable, that the property of matter to be affected by stimulus, depends upon its composition, and that every thing altering this, modifies its excitability; and he therefore concludes, that nothing is of itself either stimulating or sedative, and that the action entirely depends on the state of the organs with which it enters into combination; and that the great process of life consists in a perpetual alteration of decomposition and union, and that substances arbitrarily added to, or abstracted from living matter, sometimes diminish, and sometimes increase the activity of the organs." It is, therefore, very probable that the different proportion and combinations of elasticity and density may modify the excitability. We must, however, remain in a state of uncertainty with respect to that peculiar state of the organs of sense and motion, which modifies the vitality and temperament, until, as you observe, we are better acquainted with the chemical changes which happen during the functions of life. But let us proceed with our observations on the particular temperaments.

" I should suppose, in the temperament of vigorous imagination, where the sensibility is in its utmost perfection, that the functions of the brain were performed with great regularity, that the secretion of the nervous fluid was in due proportion and of proper density, that the vis nervea was of sufficient force, and obeyed the volitions of the imagination, and that the excitability was vigorous: in consequence of

this, I should suppose the judgment to be strong, attended with greatness of mind, and those qualities agreeable to ourselves to be predominant, as knowledge, cheerfulness, courage, tranquillity, and benevolence. "Nor should I suppose this character destitute of those qualities considered agreeable to others, as justice, good manners, wit, and ingenuity. Does he not esteem justice, fidelity, honour, veracity, allegiance, and chastity, on account of their tendency to promote the good of society? And is not that tendency inseparable from humanity, benevolence, lenity, generosity, gratitude, moderation, tenderness, friendship, and all the other social virtues? Nor can it be doubted that industry, discretion, frugality, secrecy, order, perseverance, fore-thought, judgment, and the whole class of virtues and accomplishments, of which many pages would not contain the catalogue: can it be doubted, I say, that the tendency of these qualities to promote the interest and happiness of their possessor, is the foundation of their merit?

"Who can dispute that a mind, which supports a perpetual serenity and cheerfulness, a noble dignity and undaunted spirit, a tender affection and good will to all around, as it has more enjoyment within itself, is also a more animating and rejoicing spectacle, than if dejected with melancholy, tormented with anxiety, irritated with rage, or sunk into the most abject baseness and degeneracy? And as to qualities immediately agreeable to others, they speak sufficiently for themselves; and he must be unhappy indeed, either in his own temper, or in his situation and company, who has never perceived the charms of a facetious wit or flowing affability, of a delicate modesty or decent gentleness of address and manner." This temperament we have supposed to be of the most finished cast, possessing the most enjoyment and the least suffering, with the most perfect mental organization, free from imbecility; with a spacious forehead, well defined features, and a large brain. Of a healthy and fresh colour,

with union and harmony in the form. The expression of the countenance, indicative of the state of the mind, having a beautiful serenity, or a mixture of modesty, sensibility, and sweetness. Nor should we suppose the following signs of force and vigour absent, viz. "Broad shoulders, a lank belly, firm joints, and taper legs." This is the temperament most capable of moderation, and of doing most good, and will serve to answer the four following queries. "Which is the temperament most capable of friendship? Which is happiest united in marriage? Under what temperament do men live longest?" and, "Which is most free from disease?" Some will observe, that there are very few who enjoy such a happy temperament as I have described; I rather suppose, that there are a great many of this temperament, and that there would be more, if it were not owing to ambition, avarice, and intemperance. The times in which we live, require the greatest diligence and œconomy, to procure a respectful appearance, and supply our wants, which, from our increased desires, are become many. Professional men are eager in the pursuit either of fame or riches. Commerce gives such a bent to the mind, that is often productive of the worst consequences.

"There are so many different scenes to be met with in fashionable life, which affect the mind in such a manner, that it is no wonder, when they excite in us the most destructive passions, and enervate our mental functions; they are too frequently productive of luxury and dissipation, which lead to follies, absurdities, and crimes.

"We are not therefore to expect that we shall often meet with this temperament among professional men, nor the commercial world in general. We ought to meet with it where the wants are least, especially among those who enjoy a happy retirement from the busy scenes of life; who neither indulge in luxury nor dissipation, but enjoy a calm domestic agricultural life. May we not expect to meet with it in clergymen?

"The opposite temperament to this I should suppose to consist of a small brain with slender nerves; the imagination less vigorous; the excitability either more languid or exhausted; less sensibility; ideas more defective; judgment weaker; memory untenacious; and greater irregularity and weakness of the mental functions; we are not therefore to expect those virtues and qualities agreeable to ourselves and others, to be so eminently displayed as in the former temperament; but, on the contrary, there must be less enjoyment and more suffering, because, instead of those duties referable to probity and justice, there is nothing but malice, folly, fear, sensuality, and dissipation.

"The effects of a dull imagination will be evident in the countenance, which is the index of the mind; the condition of our mental faculties is represented there, and every passion and mode of thinking has its peculiar expression. We can be at no difficulty in distinguishing when a man looks upon us with pleasure or pain; or where there is a deficiency of ideas, by the vacant and unmeaning aspect.

"Nor is it to be expected that in this temperament there should be such a beauty or uniformity in the appearance.

"The body and mind have such mutual influence, that whatever contributes to change the human constitution in its form or aspect, has an equal influence on its powers of reason and genius. And these again have a reciprocal effect in forming the countenance."

"Thus have I considered the two classes of temperaments, depending upon the state of the imagination and mental faculties, which diversify to infinity the differences that are to be found among men. It is to this that some are called good, and others dull, rustic, choleric, melancholic, phlegmatic, cruel, malicious, and dissipated; wicked, virtuous, and vicious; learned and unlearned; reasonable and unreasonable. There is a certain balance of the mental functions which is necessary to, and constitutes the first class of temperaments;

this, when properly supported, gives energy to the nervous system; but if by any means this balance is broken, either by intemperance or excess of the passions, predisposition and disease are the consequence. The same balance gives to the mind its share of good and evil, and is also necessary to the excitability of the system and action of the brain. The imagination in excess may, therefore, be the means of destroying this balance; and a permanent predisposition be formed to mania, fever, and inflammation. This is similar to the temperament known by the name of choleric. There is often a degree of energy and ferocity in the countenance; small eyes and contracted eye-brows; the actions of the muscles quick, especially in walking and speaking; much inclined to dreaming; fond of fermented liquors and animal food; eager to undertake hazardous enterprises, and very desirous of commanding.

" When the imagination is weak, with deficiency of excitability and sensation, this is always accompanied with moral weakness, and corresponds with the melancholic temperament; there is a languor of the countenance, the muscles of the eye-lids and brows hang down, and give a dejected appearance to the face; the hair black; they bear pain better than labour; are much affected by the changes of the atmosphere, and are disposed to have cold feet; their volitions are slow; although they are very attentive, yet they are slow to learn; they submit to labour with patience, and are very frequently passionate and revengeful. Those of this temperament are subject to hysteric affections, spasms, hæmorrhages, nervous fevers, and the other diseases of debility.

" The hypochondriac is a variety of this temperament; they have been supposed to be very subject to diseases of the liver; at any rate they are very whimsical, discontented, and envious. God forbid that any magistrate should be of this temperament. From the different mixtures of the quick and dull temperaments, all the others may be supposed to

be formed; the mild, the rustic, the female, &c. The female temperament may be supposed to differ in several respects from the male. They are formed for giving pleasure, and are therefore tender, delicate, and affectionate, but weaker than men. There is also a difference occasioned by the uterine and mammillary systems, which have a very great effect upon their excitability. Although they have not such a depth of thought as the male, their sensibility is greater, and they have a very quick conception of things. Their passions are for the most part strong, and they have not the same power over them as the male; they are very credulous and enthusiastic, and yet their affection and love are more durable than the male; they are also very patient, benevolent, and modest, but are very easily sunk into melancholy, or raised to rapture. I observe that novel writers make their heroines very liable to syncope upon very trifling occasions. Is this a characteristic of the female temperament? I believe they are more permanently predisposed to the diseases of debility than the male."

HEREDITARY DISEASES.

Connected with temperament, and proceeding on the same principle, may be considered hereditary or family diseases.

"It cannot be disputed," says M. Portal," that there are diseases which are transmitted from parent to child; while the latter inherits the general exterior resemblance of his father, or even his shape, characteristic traits, looks, or voice, he also inherits his father's health, strength, and sometimes his diseases. Thus Fernel, the celebrated physician of Paris, observes, *Maxima ortus nostri vis est, nec parum felices bene nati.* It cannot be denied that there are also families, the individuals of which attain a greater age than others; and this circumstance has occasioned a remark, that there are short as well as long-lived families.

"We may safely add, that if children have a physical re-

semblance to the parents, they resemble them in their moral character also. "We find," says Montaigne, "that not only are the marks of the body transmitted from father to son, but also a resemblance of temper, complexion, and inclinations of the mind." This is well ascertained by the result of examples which frequently fall under our observation; and is not one of these resemblances, physical or moral, a natural consequence of the other? Would not the moral resemblance be more striking and more frequent, if education did not produce a difference?

"We may venture to assert, that nature originally formed mankind in the most perfect manner possible, as well as all other beings, both as to the structure of the different parts, their configuration, size, and relative situations. Thus man, in the state of nature, would enjoy the best health, the greatest strength, and the finest and most regular shape: finally, the moral faculties would exist in all their energy, if some extraneous cause did not intervene to weaken them; can we refuse to admit this as an incontrovertible axiom?

"But there are many causes which derange this admirable harmony; may not the parents previous to their marriage have contracted diseases, which have occasioned in their organs real affections, rendering them totally different to what they were in a state of nature? Thus, at the moment of procreation, they receive the different characteristics of their parents, which they have unfortunately acquired, and which they may transmit to their progeny. Has not the mother during pregnancy an influence over the infant in her womb, either by assimilating it to herself in some measure by the nourishment she gives it, or by causing it to feel a part of the evils she herself experiences, and communicating some impressions resulting from these causes?

"The infant, on coming into the world, may be very different from what it would have been had these causes not existed, which are as it were extraneous to it, and which

make it differ from its parents as to their primitive state of health, and make it resemble them in their diseases; and as the number and inveteracy of diseases increase as men advance in life, however strong or healthy they may have been originally, the children of old men are subject to hereditary diseases, and their constitutions more feeble. The nursing of the child by its own mother, or by a strange nurse, may also produce other differences more or less remarkable, with respect to its physical or moral constitution, but which will produce a resemblance to its nurse. Thus the ancients, who regarded the nurse as a second mother, comprehended among hereditary diseases the *morbi congeniti, cognati, seu connutriti* of Hippocrates, the *morbi parentales* of Pliny, the *hæreditarii* of Fernel, and those which infants contract from their nurses; and in fact, these are too frequently conspicuous.

" Hippocrates, Galen, Fernel, Ingrassias, Baillou, Lazare, Riviere, Mead, Boerhaave, Morgagni, Stahl, Senac, Lieutaud, Haller, Zeller, Van Swieten, and other great physicians, whom it would be futile to name after them, have admitted of hereditary or family diseases, and have included in this class, scrophula, rachitis, mania, epilepsy, convulsions, apoplexy, paralysis, diseases of dentition, pulmonary consumption, asthma, dropsy, gout, and stone in the bladder; and can there be a single practitioner, more especially in a great city, where the examples of these diseases are more numerous, who is not convinced from personal observation, that the children of parents who have been subject to these diseases, have generally inherited them? We say generally, because there are numerous exceptions on this head, even when the legitimacy of birth cannot be questioned.

" To these hereditary diseases may we not add cancer and cataract, with deafness and dumbness from the birth? Morgagni saw three sisters who were dumb from their infancy. Other authors have mentioned similar instances; and many

such have come under our own observation. Those acquainted with herniary complaints do not hesitate to affirm that hernia is more frequent in some families than in others; so far, therefore, from limiting the number of hereditary diseases, and still farther from denying their existence entirely, as some authors have done, we think their numbers are very considerable. Without, however, wishing to go to the extent that Hippocrates has done, who was of opinion, that all diseases were hereditary, *aliqua quidem ex parte;* and that all children inherited, more or less, the temperament of their fathers.

" The opinion of Hippocrates has been followed by all except Sennert, Ethmuller, and Maurice Hoffman, who do not admit of any acute diseases being hereditary. As to the transmission of chronic diseases from father to son, they have regarded it not only as possible, but as very common; and this doctrine was so generally adopted in 1748, that the Academy of Dijon proposed a prize question, with a view to determine *how the transmission took place.* M. Louis, who subsequently became so celebrated in the Annals of French Surgery, instead of answering the question proposed, published a well written Dissertation, in order to prove that there were no hereditary diseases; but his arguments on this subject are more ingenious than well founded.

" The difficulty, or rather the impossibility of a satisfactory explanation of the communication of diseases from parents to children, has more than once given occasion to medical authors, to deny the existence of hereditary taints; as if it were always necessary, before admitting an effect, to know its cause; and yet, by a strange contradiction, the same writers do not hesitate to recognise the external resemblance between children and their parents, which they cannot account for. *Rerum eventa magis arbitror, quam causas,* says Cicero, *quæri oportere; et hoc sum contentus quod etiam si quomodo quidquid fiat ignorem, quod fiat intelligo.*

" Let us study the phenomena of nature, even when she conceals from us the means she employs for producing them; to be acquainted with them is always curious, and it is useful if it facilitates the progress of the healing art.

" The Royal Society of Medicine gave out, as Questions for the Prize Dissertations for 1787—1st, Do hereditary diseases exist, and what are they? 2dly, Is it in the power of medicine to hinder their developement, or to cure them when they have broken out?

" Some of the memoirs presented on this occasion have been printed, but what their authors have said, does not appear to us to have exhausted the subject. The present remarks being the result of our clinical and anatomical observations, prove that there are family or hereditary diseases, and also seem to lead us to the knowledge of the nature and treatment of several of these diseases.

" Hereditary disease consists not only in mal-conformations, more or less extensive, of the external parts, but frequently also of internal deformities, and which dissection alone can demonstrate; it is from these internal mal-conformations, and also from peculiarities in structure, that the alterations of the functions, or the various symptomatic hereditary diseases, proceed. We shall endeavour to prove this in the following pages.

" After mentioning such mal-conformations as are external, we shall proceed to speak of those which we have discovered in the internal parts.

" It cannot be denied, that there are families, the individuals of which have larger heads than usual. There are some also, but not so common, who have small heads and large bodies: at other times, and in the same family, we meet with craniums, long, narrow, broad, short, or high in proportion; this, however, is of no consequence relative to the moral and physical constitution, if the capacity of the

cranium be the same, which is generally the case, as Hippocrates and other accurate observers have remarked.

" To return to the differences observed in families:—The children of some parents have the nasal bones and cartilages more elevated or flattened; shorter or longer; and more or less covered with a fatty substance. Hence it follows, that the individuals of certain families have noses of a form and size which distinguish them from others; thus, the family to which Charles Boromæus belonged, was remarkable for large aquiline noses, which are to this day observable in his descendants. The Bourbons have all large noses, and the individuals belonging to the Austrian branch have thick lips. I have known families, in which the ears were very large, and in others in which they were small, and almost without any lobulæ.

" There are individuals also, the bones of whose faces are more or less convex, the lower part of the chin hollow or elevated; the face more or less oval, or irregularly triangular or square; more prominent or flat, and sometimes as if truncated at the lower extremity from a defect in the developement of the lower jaw.

" In certain families the individuals have capacious chests, and in others this cavity is narrow and contracted; some families have broad shoulders, others narrow, and this last defect coincides with that of a too narrow chest.

" There are many families, the individuals of which are hunch-backed. I know one family at Paris, in which there are seven of this description; others have their limbs distorted, or too short, or too long, in proportion to the rest of their bodies.

" There are persons also, with small or large hands, and with short or long feet. A man was once exhibited to us, at the Academy of Sciences, whose hands were of a mon-

strous size, and he assured us that his father's were equally large.

" Some families, as mentioned by M. Morand, in a paper printed among the Memoirs of the Academy of Sciences (1769) were remarkable for having children with six fingers.

" External deformities in families have been noticed in all ages, and the ancients never doubted that they were hereditary. They were so convinced that children resembled their parents, that they used the terms *macrocephali à macrocephalis;* and the Romans, *capitones à capitonibus, pumiliones à pumilionibus.*

" Independently of these differences with respect to the developement of the bones, we may remark in some families real differences in the volume of the muscles of the trunk and of the limbs. I have seen instances where a father and his two sons had the left side of the body, with respect to the muscles, much larger than the right; they therefore used the left side and limbs more frequently than the right, and were of course left handed. In some persons the left side is stronger than the right; but this is very rare, for men of all countries are generally strongest in the right side.

" I knew a family, the father and children of which possessed such a disposition in the muscles of the nose and of the lips, and such great mobility in the cartilage of the nose, that they could not speak without moving them. In the act of speaking, the point of the nose was constantly in motion.

" I knew a Spanish nobleman who had one cheek larger than the other, the maxillary bone on one side and the integuments being larger than the natural size. He told me that his father and his uncles had a similar deformity, which was certified to me by several Spaniards then in Paris.

" Some authors have described families of *triorchides*, or

with three testicles, among which the Coglioni have been mentioned. On this subject, however, we should not forget, that we may sometimes mistake a preternatural tumour in the bursæ, or an epiplocele, for a testicle.

" These external deformities ought to lead us to inquiries with respect to the interior of the human body. May there not be natural or morbid relations between the internal and external parts? I have collected several examples of external resemblances in persons of the same family, who died of the same diseases; and I do not doubt, that if the inquiries now suggested are followed up, the results will every day prove more interesting. Future anatomical researches will shew, that the viscera in the individuals of certain families were larger or smaller, and more or less different in their substance, so as to produce hereditary diseases.

" Among several facts of this kind, which I have collected, I shall confine myself to two families; those of Vitel, Rue Saints Peres; and Villement, perfumer, Marche St. Martin. In these families several individuals died of palpitation of the heart, after medical assistance had been administered in vain. I was present at the opening of the bodies of two of these patients, one in each family, and I saw that the left ventricle was very much dilated, although the parietes of this ventricle was enormously thick in both subjects. As other relations had also died under circumstances perfectly similar, we may reasonably suppose that if they had been opened, the same mal-conformation would have been found.

" Palpitations of the heart, in consequence of aneurism, have been often noticed by authors, and particularly by Lancisi, who cites cases of this kind, which he witnessed in Italy, and which are still very frequent in that country. I have often been consulted myself by Italians for similar complaints. The Gonzalvi family presents a striking example of this description, now under our observation.

" Are there not also nervous and spasmodic affections in families, which derange the functions of the mind? or, do these functions remain unaffected during convulsions or inordinate exertions of the muscles?

" How many families are there, in which mania, hysterics, and shakings of the limbs are hereditary? At Paris, we have seen the Marechal de Beauveau and four of his sisters, who were subject to very singular shakings of the head. It may perhaps be supposed, that this kind of convulsion was the effect of imitation from the parties frequently seeing each other, of which there are examples; but it could not be so in this case, for the parties were never long resident together in one place. It is also remarkable, that this shaking of the head attacked all of them at nearly the same age.

" Morgagni has recorded the history of a family, some of the individuals of which died from excessive vomiting. In one of these persons, whose body was opened, the stomach was found shrivelled up, the pancreas hard, as if schirrous, and there were numerous concretions which united the pericardium to the heart.

" There are families remarkable for having the epiploon enormously surcharged with fat, or with larger bellies than is requisite for their size in other respects; this kind of malconformation is frequently followed by dropsy, and on opening the bodies of persons of this description, steatomatus concretions are generally found. I could adduce several examples in support of what I advance.

" Do these hereditary diseases arise from various causes, or are they to be ascribed in most cases to one alone? This question seems worthy of some attention.

" In the first place, it is certain, that several of these diseases are indicated by the external configuration of the bony parts, tending more or less to rachitis, which is of course propagated in families.

" May not epileptic and maniacal persons have an external conformation; of the cranium for instance, which inclines more or less to rachitis?

" Are not pulmonary phthises announced by the narrowness of the chest, a bad conformation of the sides, or the clavicles with a projection of the shoulders from behind *(scapulæ alatæ)?* If these questions are answered in the affirmative, it follows that several hereditary diseases are more or less allied to rachitis.

" This vicious conformation, however, does not exercise all its bad effects in a visible manner upon the osseous part of the trunk; it produces internal deformities. These are often discovered in the female pelvis, when the body appears in other respects well formed.

" But rachitis, or the affection of the bones, which alters their form, being an effect of the alteration in the lymph, well ascertained by the symptoms of the disease and by dissections, the alteration of these substances from the same cause may probably take place in other internal parts, without the bones being visibly affected. A thousand facts might be adduced in support of this opinion.

" However different these diseases may appear, there is little doubt that they are the effects of one cause, differing only with respect to a few modifications, and with respect to the diversity of the different organs affected, the functions of which are variously disturbed.

" Thus there are scrophulous persons who have steatomatous congestions in the internal parts, without having the glands swelled; in the same way, rachitis, which is the effect of a scrophulous habit, particularly of an hereditary taint, may produce a developement more or less irregular of the body, or of some of its parts, or even a deficiency of nutrition; in such a manner that certain parts acquire an increase of size, and others lose it. This necessarily occa-

sions diseases, which are propagated in families as the schrophulous taint is visibly transmitted when it is well characterized.

" The brain in maniacs, epileptic and apoplectic persons, from their infancy, (whether the craniums of subjects that have died of these diseases, have more or less deformity, as is very common, or appear in their natural state,) is always more or less hardened by steatomatous substances, and particularly the *medulla oblongata*, and the adjoining parts of the brain; as is the case in scrophula. This fact is proved by anatomical observation.

" Out of the many cases of this description, with which I am acquainted, I shall only mention that of a young man who died of epilepsy, and whose mother was scrophulous, as was manifested in the glands of the neck, and who was also subject to epilepsy herself. The son died of an apoplexy after an epileptic fit, as is generally the case; and M. Markham, my assistant, opened the body. He found in the medulla oblongata, and in the productions of the brain and of the cerebellum adjoining to it, an almost cartilaginous induration; there was no apparent malconformation in the bones of the cranium.

" Anatomists have frequently observed similar indurations in the brain, and sometimes also in other organs of the chest and abdomen, with swellings in the lymphatic glands, in patients who had been maniacal, or who had died of apoplexy, and whose parents expired under the same disease, without any malconformation of the cranium.

" The same appearances have been found in subjects when the mind was partially and at times alienated; in these there is sometimes an apparent malconformation of the cranium, or some symptoms of a scrophulous taint, or perhaps none of these morbid affections were accompanied by external signs; but are the indurations of the brain of

the same nature? It is impossible to attribute any other to them."

HYDROPHOBIA

Offers nothing farther, since our last, to remove the veil of obscurity that overshadows it. Amid the lack of means which medicine bestows to counteract the effects of this subtle and too active poison, the random injection of medicines, and the application of gases, have been proposed. Both these plans we should consider equally dangerous, and imcompetent for the end proposed.

SPASMODIC DISEASES.

Spasmodic Diseases are a class of more frequent occurrence in modern life than most others. In their mild form they are much under the command of the practitioner; but in their aggravated state, as tetanus and its several varieties, they too often baffle every means of relief. The history of these diseases, in their worst stage, is instructive, and we are presented with two by Mr. Howship, arising both from wounds, which he thus details:

"Case I. *Of Lock Jaw with Tetanus, which terminated fatally.*

"On the ever memorable 21st of October, 1805, a lad, sixteen years of age, was struck on the hip by a splinter, while engaged on board H. M. S. Colossus. The wound was just opposite to the spine of the right os ilium; it was not large, but it was deep, and like the general run of wounds from gunshot, very foul and slow of digestion. Very little pain was felt either in the wound or its neighbourhood.

"On the 5th day after, he complained of difficulty in swallowing; this, however, was but the prelude to sufferings infinitely more severe. On the 8th day, when I visited that part of the hospital, he was in dreadful agonies, full of distress and spasm. His jaws by this time were firmly closed. In order to ascertain whether any visible action could be ob-

served in those situations where the pains were described to be most urgent, the clothes were thrown aside, when the whole of the muscles of the abdomen and limbs were found in a state of alternate vibration, falling in succession under the influence of the pain and irritation.

" The limb below the wounded part he complained much of, as also of the whole of his breast. A warm bath was proposed and got ready; but it was not without great difficulty and infinite distress, that the patient could be raised from his bed and placed in the bath. He found himself, however, considerably relieved from the violence of the spasms after the first ten minutes. In twenty his strength failed; he was therefore raised from the bath, well rubbed, and laid in dry blankets.

" The benefit derived from this experiment was a temporary alleviation in the severity of the symptoms. It was proposed to try the effect of mercury, the ointment of which was several times rubbed in over the spine and limbs. The spasms were now universal, and probably from the irritation being constant, the spasmodic action was constant also, or rather the contractions returned in so rapid a succession, as to keep the whole frame in unceasing and terrible action; while the poor creature at times grinding his teeth, was constantly moaning from the excessive violence of the pain.

" In the middle of the day after he had used the bath, the pulse was even, quick, and softer than before. On the next day (the 9th), the frequency of the spasms, and the horrible torments they produced, continued to increase upon him.

" Towards the evening the spasms became more and more severe in their effects upon the organs of respiration, and at length he expired, apparently at the time when the same spasmodic action seized upon the heart.

" In this case, the only point in the treatment which may be considered to have promised any thing, was that of in-

troducing into the system a sufficient quantity of mercury to alter the prevailing tone and disposition of the nervous system. The frictions did not in this experiment produce any decided effect upon the mouth; but in other cases, in which the most satisfactory proofs of the full action of the remedy have existed, it has been found to have no power to arrest the progress of this most formidable disease.

"CASE II. *In which Lock Jaw, attended with Tetanus, ended fatally within a Period uncommonly short.*

"W. RICHEY, an Italian, aged 30, seaman on board his Majesty's ship Bellerophon, lost his right arm, which was shot away by a heavy ball. Part of the upper extremity of the humerus remaining, it was removed soon after by an operation similar to that which is performed for amputation at the shoulder-joint. Unfortunately the limb had been carried away so close to the body, that it was not possible to make any provision for the formation of a round stump by a fold of the integuments. The muscular parts projected considerably beyond the edge of the skin, and neither pressure nor adhesive applications rendered much assistance in bringing it into form.

"This man constantly said he felt but very little pain in or about the wound. On the 8th day he complained of stiffness and pain about the angles of the jaw, and these pains increased and extended their influence so rapidly, that he was with much difficulty raised up in his bed on the following morning, in order to his being dressed and shifted. There seemed by this time to be an established state of general rigidity affecting all the muscular parts of the body and limbs, which prevented him from all voluntary motion; while his being in any manner disturbed in his person, was constantly productive of aggravated pain.

"On the next day (the 10th) he was worse, all his sufferings being greatly increased; in the evening, he had, with much difficulty, been raised up to drink some water; he re-

turned the vessel to the nurse, after he had swallowed some of the fluid, without any apparent increase of pain, or other aggravation of his symptoms; he complained of no distress or new uneasiness; he laid himself back in the bed, and silently breathed his last, not even uttering the least sound expressive of disturbance.

"In this case the progress of the disease was so rapid, that almost before any vigorous measures were adopted for his relief, the man was lost. Mercurial frictions were commenced upon, but only on the day before the evening on which his dissolution took place.

"There is not a doubt, but that in this case also, the sudden and unexpected close of the scene was the consequence of a sudden spasm seizing upon the heart, and probably the organs of respiration; the most general mode of termination in this disease."

PULMONARY CONSUMPTION.

The infectious nature of this malady is a subject on which authors are much divided. In Spain and Portugal it is considered so certain, that the clothes, and every thing the diseased has used, as bedding, &c. are regularly burned. Some observations of Dr. Kinglake tend to confirm this opinion: "It is well known," he observes, "that diseases of various descriptions generate and evolve during their existence, and more particularly towards their termination, a certain property, whether of a *material* or *motive* nature, that has a tendency to impart its morbid quality to those who may come within the sphere of its active power, and whose constitutional susceptibility may be favourable to its infectious influence. The occasional extension of common fever by personal intercourse, as well as that of a more typhoid character, evinces its capability of communicating infection. This effect, however, is not dependent on the mere existence of an infectious power, and on an opportunity of imparting that infection, but on a variety of collateral circumstances with

which the relative efficiency of these causes is essentially connected. These circumstances are chiefly a given concentration of the infectious cause, and a certain capability or aptitude for receiving its active impression; if either the one or the other should fail, happily no effect is produced. This incongruity fortunately often prevents and confines the empire of infectious disease within comparatively narrow limits.

"Matter, in all its various arrangements, possesses properties characteristic of the particular nature of its existence. Its active powers in some form are more direct and efficient than in others; but in no shape whatever is it reasonable to suppose it quite inert. In the peculiar conditions necessary to animal health, no deviation can happen consistently with the avoidance of disease. When disease actually occurs, effects, different from those of health, necessarily arise. These will be various, accordingly to the degree or intensity of the morbific cause, and will possess properties and exert an influence correspondent to the particular nature of the active power. It is in this mode of estimating the efficiency of morbid power, that some just conclusion may be drawn respecting the infectious agency of diseases in general, and more especially of those that seem directly to impart their morbid influence in suitable circumstances for its operation.

"In the advanced stage of phithisis pulmonalis, more particularly, occurs an aggravated state of disease that would seem well adapted to concentrate and give full effect to any infectious powers, which, in common with all diseased changes from the healthful condition of life, it may be supposed to possess. The hectic commotion, the wearing decomposition, the consequent extrication of the constituent principles of animal matter, and the new arrangement which may be formed of these substances, saying nothing of the peculiar morbid action obtaining in this disease, and which

may be embodied and transferred, render it extremely probable that this disease is capable of exerting infectious influence, and that it actually does appear to me verified by some instances of its having been imparted to persons closely attending the last stage of its existence. I have more particularly in my recollection the case of one sister sleeping with and closely associating with another, who laboured under phthisis pulmonalis in its worst form, in whom, ulceration of the lungs appeared to have taken place, accompanied with the most embarrassing state of cough, fœtid expectoration, and cadaverously smelling night-sweats. Death, at length, closed this hopeless scene of disease. The surviving sister, who had anxiously watched and assisted during its destructive progress, soon became disordered by strictured breathing, painful cough, febrile rigours and heats, loss of appetite, and sleepless nights; to these symptoms were speedily added, bloody expectoration, night-sweats, and every other appearance of an advanced and irreparable state of pulmonary consumption, which soon terminated as the preceding instance.

"It should be remarked, that in neither of these cases did hereditary or scrophulous predisposition to pulmonary disease appear to exist. Both sisters had been uniformly free from every suspicion of even a tendency to the disease, until it actually surprised the one, and overtook the other, as a probable consequence of an unremitted personal intercourse. I have often had an opportunity of observing a threatening degree of pulmonary affection to have apparently resulted from incautiously inhaling the distempered vapour of phthisical patients, but do not recollect any instance in which the effect was so direct and unequivocal as in the case recited.

"It does not follow, that on every occasion in which injury is done, that it should be of the irreparable nature which marks pulmonary consumption; it may disorder the lungs without inducing that deeply diseased affection of

them: it may produce a disposition to asthma, and an aptitude for pulmonary ailment on occasions which might not otherwise have become active. In this view of the subject, it would be adviseable to avoid being too closely inmated with patients in the dying stage of pulmonary disease. At a period when no benefit can be rendered and much mischief may arise, it will be no imputation on humanity to withhold unnecessary attendance.

"It does not appear that the ground for suspecting the infectious nature of phthisis pulmonalis would warrant a belief that it is of that active quality as would justify even the timid in not paying a due degree of personal attention to the diseased; it is the incaution of dwelling with such patients, in leaning over them by the hour, in breathing in the immediate atmosphere of their lungs without restraint, that deserves to be pointed out as exceptionable, because in itself useless, and certainly fraught with serious evil to those who may pursue that hitherto unobjected and supposed unobjectionable course of conduct."

OBSERVATIONS ON HYDROPHOBIA.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—THE government having directed the attention of the medical world to Hydrophobia, I beg leave to submit the following observations to your care. The medical profession are divided on this dreadful disease: one party consider it only an aggravated case of Tetanus, while the other refer it to a specific contagion communicated to man by an animal in a rabid state. To the latter I belong. In the first place, to render this disease a complete case of tetanus, we must suppose, that in every instance usually termed hydrophobic, the bite must necessarily produce such a quantum of compression and laceration, as shall occasion the symptoms that mark the common cases of tetanus, otherwise, down go the contest and controversy: we will take the well-

marked case of Ann Chandler, in which I think I am warranted to say, and which a reference to the case will confirm, that the compression and laceration produced by the insertion of the cat's teeth, were not so violent as to induce tetanus if the cat had been in a state of health. Many are the facts that prove animal saliva to be inimical to the human constitution, and none more than that of the dog, who, perhaps, among the animal creation, may be ranked the only beast that delights in fœtid ulcers; yet that saliva in a state of health and tranquillity has never been known to produce tetanus or hydrophobia; why then perplex us with vain and futile hypotheses? why deny the cause of a disease which corresponding facts prove? Is not the *Lues Venerea* communicable? Is not the *Lues Bovilla*, a disease peculiar to cows, communicable to men? Is not Hydrophobia acknowledged to be a disease peculiar to dogs? When I say peculiar, I mean a disease spontaneously arising without previous cause or infection. Having established this fact, the inference I draw is this, that if the *Lues Bovilla* can be communicated, of which the Jennerian system is a proof, why shall we deny the cause of Hydrophobia, unless we wish to place society in a delusive state of security? A doubt on my mind remains not respecting this point, that an animal in a rabid state can communicate, by the insertion of a specific contagion, from whatever unknown cause, a certain disease, similar in character and symptoms to that under which it labours, and that the vehicle of this contagion should be the saliva, is not at all singular when we reflect that dogs never perspire; therefore, as nature is ever correct in her operation, the salival glands are to them, what the miliary glands are to man, and in a state of heat, thirst, or anxiety, the dog discharges more saliva; and as that saliva in a state of irritation becomes acrid, fever and delirium succeed; thus the customary law of the animal economy becomes confused, and death closes the terrific scene. If the facts were not sufficiently conclusive

to sceptical minds, let them take analogy for their guide, and see what effects obstructed perspiration produces on man: fever, delirium, frenzy, are its effects; but here delirium arises not so much from the concussion and laceration of the part wounded, as from the vitiated state of the blood, nor is delirium a necessary concomitant, for many cases are on record where the patient retained the full possession of his reason; nor has the mind any thing to do with the aversion to food and drink any more than it has in anorexia; this aversion, though the strongest characteristic of hydrophobia, depends entirely on the connected spasmodic affection of the æsophagus; and therefore I conclude from these corresponding facts, that the disease known by the name of hydrophobia is absolutely communicated by a rabid animal, and that we never shall ascertain the particular nature of this disease until we have an opportunity of seeing it in all its stages in the animal itself. It is of the first importance to society, to endeavour to secure the life of the rabid animal, and till that desirable object is obtained, the cure of the disease is beyond human power.

The following case illustrates these observations: "David Hale, of Bidford, Warwickshire, a young man about twenty years of age, while leaning over the gate of his father's garden, on the evening of the 1st of September, 1808, observed a cat coming down the garden walk towards him. As the animal resolved to pass under the gate, the young man placed his foot in the way to prevent her, which she instantly seized, and on putting down his hand to extricate himself, she bit him very severely by the thumb. The father of the young man hearing a noise, ran out of the house with a stick; he pointed it towards the cat several times, and she as often seized it in the most ferocious manner. Mr. Hale then declared the animal was mad, and immediately destroyed her. The young man went, without delay, to Witminster, and was, according to the opinions of advisers

there, properly dipped in the salt water, in the hope of averting the dreadful consequences that might otherwise arise from the bite of the animal. He returned home again, and for more than a month enjoyed his usual health. On Tuesday, the 11th of October, the young man was taken ill with the head-ache. On Wednesday, his head-ache continued and got worse; and in the evening he had symptoms of a sore throat. On Thursday, the soreness of his throat increased; he could not swallow; his head was very bad; and if any liquid was offered him, was much agitated and convulsed. On Friday, he could not suffer any liquid to come near him; but he ate a small bit of toasted bread. He was sensible of his situation, and desired every one not to endanger themselves by attending him. He foamed at the mouth very much, and at times was greatly convulsed. On Saturday, his malady increased; and on Sunday he was confined in his bed raving mad. Two people were constantly employed in wiping the foam from him, which issued from his mouth and nose in large quantities. On Monday morning, the 7th, the unfortunate young man was released from the most dreadful of all human afflictions; he expired about seven o'clock in the greatest agonies."

I remain, Gentlemen,

Your obedient servant,

London, March 25, 1809. T. MOTT CATON.

OBSERVATIONS ON THE PECULIAR STRUCTURE OF CERTAIN PARTS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—A CURIOUS and perhaps useful subject entered into by physiologists is, the reasons for the peculiar structure of certain parts. In applying this on the subject of the genital system in the sexes, I shall beg leave to hazard a speculation which may perhaps lead to some important conclusions.

In examining then the difference of these parts of the body in the sexes, I would remark, that the sensibility of all parts is increased by secretion: hence, in the male, that union of passages adapted both to the urinary and genital parts; for the use of the genital part taking place only at times by means of the urine constantly pervading the passages, the latter are retained in a certain sensible state. That this is the case, appears from the different situation of the urethra in the female, in consequence of the menses having the same effect; and we find in general that a fluid pervades all sensible parts, and seems necessary to continue their sensibility. Hence, from this effect of the fluid we deduce the propriety of attempting to lessen its power, and by dilution blunt the irritation of its stimulus, either where its acrimony is morbidly increased, or the surface it pervades is in too sensible a state.

All the principal parts of the genital system are particularly liable to be increased in their size by irritation. Hence we find, especially after venereal affections, they never regain entirely their original state. They are always largest in salacious animals; and on this account they are observed most so in the inhabitants of the warmer climates, bearing no proportion, as is conspicuous in the other organs, to the natural proportions of the body. In the testicles this is so remarkable, as to be mistaken for enlargement from disease; and of this you will find examples in De Graaf, though the mere effect of venereal excesses.

The exact structure, therefore, of all the parts of the genital system is of material consequence to be known for properly understanding the treatment of their complaints. Without it, we can never fully ascertain those various consequences which are known to succeed the primary action of the venereal virus in gonorrhœa, and which frequently during life continue their effects on those parts. It is remarked by Mr. Pott in his Lectures, that no part is so liable to become dis-

eased from the effects of any preceding disease, as the prostate in the male. These effects are seldom felt, as the primary disease is forgotten till advanced life, when the fluid secreted by it ceases to flow, and it becomes in a manner useless, as no longer designed for generation. It is then particularly in those, who have been often under gonorrhœa, that the prostate and parts connected become extremely painful from its hard, indurated state, which renders the remains of life generally miserable. Hence the necessity for paying attention to the early removal of those complaints of the urethra which, from sympathy, have a tendency to affect these parts.

The manner in which the functions of the genital system are performed, and their influence on the rest of the body, are no less important than the preceding topic.

Though the nervous system is allowed to be the medium of sensation, and should occupy, therefore, our chief attention in the consideration of the economy, yet the origin of this sensation may be considered as the effect of that process peculiar to the structure of glands, and which has in general received the name of secretion. This particular effect of glands has occasioned some of them, in which it is more apparent, to receive from physiologists the appellation of incentive, and under this title we would especially comprehend the brain, and those glands that are characteristic of the sexes. The first of these has afforded much dispute, and whether acting by means of a fluid whose influence pervades the system, or depending on a simple state of fibre affected, has been often and most unsuccessfully combated. We observe, however, that it is subject to those diseases peculiar to glands; that the acuteness of sensation is every where heightened by a glandular structure; and the subtility of some particular fluids favours strongly the supposition. The structure of all the incentive glands appears to possess much analogy. In all, the secretion, where we can detect it, is car-

ried on slowly, and its rapidity seems even prevented by the manner in which the circulation to them is supplied. This is very remarkable in the testicles. The spermatic arteries are perhaps longer than any others of the body. They are small and dense in proportion to the size of the glands they supply, and by feeling the pulse in the quadruped before they arrive at the testicles, their circulation is found even more languid. In this way the blood is retarded in the glands, and their veins we find very liable to become varicous. In the brain, again, we observe the force of the blood broken as it ascends by the angles which the arteries form in their entrance to the skull, by their various convolutions, which are even more minute than those of the testicles, and the circulation is also retarded in its return by the reception of the blood into large sinuses, where a slow passage through them is only permitted. In the ovarium of females the spermatic arteries observe a similar distribution. They take their rise at a considerable length from the glands, and, after arriving at them, make a number of serpentine turns, which certainly serve a particular purpose.

From the moment of existence, the action of the brain commences. It supplies that energy to every part which is necessary to the exercise of its functions. This energy, as far from observation as we can determine, seems to consist in a certain excitement of the part, which increases the original quantity of fluids determined to it, and thus renders stronger the mutual re-action on which life depends. This energy, however, is not communicated to every organ in the same degree at the same time. Certain laws determine this, connected with the original formation of the body; and in consequence of these laws, the incentive glands peculiar to the sexes receive only this energy at a particular period of life, which has been termed, from the appearances then occurring, the age of puberty. It is at this age the facility of the fibres to elongation begins to diminish, and the determination,

which indiscriminately took place to every part during the former period, is now directed chiefly to certain glands. The redundancy of fluids peculiar to the puerile state, which served by its retention for a ready supply of additional matter, and for the quick elongation of that matter when formed into solid, is now converted, from the resistance of the solid, to the same rapidity of elongation, to form new secretions, which have an effect, by giving additional tone to the action of the solids, to increase the different discharges, and to dissipate, as no longer necessary, the redundance of fluid parts. The semen, therefore, is absorbed into the circulation, and acts as a natural stimulant on the sensible fibre, and as affording additional vigour to the contractions of the heart. Hence we may consider a certain re-action between the brain and the other incentive organs as taking place, and the consequence of this re-action, which is at the same time a proof of it, we find to be the cure of many diseases depending on the state of the brain, and particularly on the force of its circulation. But as the constitution of the female is intended to differ from that of the male, this additional vigour, which the age of puberty would otherwise induce, and which would prove unfavourable to the purposes of generation, the principal object of the sex, is counteracted by a discharge of a particular nature, which is frequent, profuse, and immediately affects the force of the heart, by proceeding from the general mass of fluids, and consequently destroys the tone of the system. This is the menses; and their origin depends on the same causes which influence the secretion of the testicles; for the blood being determined, as we formerly remarked, in considerable quantity, to all the incentive glands, is, by the manner of their circulation, retarded there; a proof of which we gave in the frequent varicose state of the spermatic vein. In the female, from the structure of the vessels of the part, and the intention which nature possesses to produce a discharge, the determination at times occasions

their rupture at the most resisting part, and this rupture is always repeated on a certain degree of accumulation taking place, which the natural texture of the vessels, the degree of irritation on the ovaria from the brain, and custom itself at last establishes in regard to its frequency. The action of the incentive organs peculiar to the sexes lasts only a certain period, which, during its continuance, has been termed the age of passion; and the propensities and desires which their action creates, are much stronger than any other, which actuate the human frame. The mischiefs in society from this source occupy equally the pulpit and the bench.

I am, Gentlemen,

Your obedient servant,

Manchester, March 2, 1809. T. W.

SINGULAR CASE OF CONTAGIOUS MANIA IN ANIMALS, BY MR. FRANCIS KIERNAN, MEMBER OF THE ROYAL COLLEGE OF SURGEONS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—SINCE the attention of medical men has been called of late so particularly to the subject of Hydrophobia, its appearance and progress in the brute creation ought to form the basis on which their observations are made. It appears, besides the virus of hydrophobia, there are other sources of active contagion affecting animals, which prove in their consequences equally fatal. This remark I have been induced to make from a circumstance just now related to me of a very extraordinary nature. Two horses, the property of Mr. Stanford, of Bond-street, were seized suddenly with all the symptoms of furious insanity to such a degree, that with their teeth they tore the manger, and the flags of the floor of the stable were forcibly rent up with their hoofs. In this state of extreme and unaccountable agony they continued three days, when they died. So sudden was the attack, that one of the horses had been out the day previous to his illness.

Soon after this, a dog, the property of the same gentleman, and which lived in the stable, was seized in the same manner as the horses, and the disease likewise in him proved equally fatal. A cat, which was also an inmate of the same place, was equally unfortunate, and fell a victim to a similar train of symptoms. This disease was clearly not hydrophobia, and yet it was one of a highly contagious nature. The animals, though in extreme agony, shewed no disposition to bite, so common in hydrophobic cases. Neither could the disease be one of simple inflammation, or increased excitement; otherwise, though it affected the horses, it would not have been communicated to the other animals. This fact then only points out the varied nature of contagion, and the difficulties that attend our detecting either its origin or its nature. This should teach those employed on the subject of hydrophobia to proceed with extreme caution, and to form no deductions which are to influence the mode of treatment, but such as are sure and unerring. If any of your correspondents can throw light on the above statement, they will oblige,

Gentlemen, your obedient servant,

Charlotte-street, Bedford-square, F. KIERNAN.
March 10, 1809.

ON THE ORIGIN OF THE SPECIFIC CONTAGION OF TYPHUS.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—THE debarkation of the troops from Spain at the different ports, has of late presented scenes of disease that tend to horrify the picture of war in even more detestable colours than what reason and philosophy generally paint it: 30 and 40, we are told, are daily falling the devoted victims in spite of every medical exertion, being cut off by a typhus fever, the consequence of complete exhaustion. It is on this subject I would beg leave to offer a few observa-

tions. It certainly would be of much importance to decide whether such a fever ever exists without the application of contagion to produce the specific form as a disease. Authors in general leave this point undecided; and, in enumerating the causes of fever, conceive it to be generated independent of a contagion, on the idea of mere debility. But if the disease can be proved to exist under circumstances in which no debility is present, as is well known to take place, then the theory of mere debility is destroyed. The fact that destroys entirely the supposition of a non-contagious principle is the circumstance, that typhus contagion once abroad attacks more frequently the flower of youth and manhood, the prime of life, than any other period. A contagious principle, then, being evidently the origin of typhus, the question next is, how is this principle generated? The actual manner it is certainly impossible to detect; but a leading point is, does the suppurative process in wounds tend any way to its production? If this were the case, then the treatment of such patients, and confining them as much as possible to situations by themselves would be a point to be greatly studied in all hospitals. We know indeed that erysipelas of a contagious nature is a common consequence of such injuries, where large suppurations take place, and attack all in the same wards, or within the precincts of the same atmosphere. But we should conceive that the state of suppuration is not capable of generating this specific cause of typhus, that mortality must first proceed to a great degree, and that then the decomposition of animal matter which death occasions, under certain circumstances of activity, gives origin to this contagious principle which produces the typhoid form of disease. Hence the necessity of flying every crowded scene of mortality, which may generate this cause; and we should therefore doubt whether a vitiated atmosphere from mere confinement of a number of persons crowded together, or from any other way in which the air becomes tainted, would

operate to produce this peculiar matter. We conceive the source of typhus to be a contagion generated from the decomposition of dead animal matter alone, under circumstances with which we are yet unacquainted.

I am, Gentlemen, your obedient servant,

Plymouth, March 16, 1809. W. R.

Observations on some of the most frequent and important Diseases of the Heart; on Aneurism of the Thoracic Aorta; on preternatural Pulsation in the Epigastric Region: and on the unusual Origin and Distribution of some of the large Arteries of the Human Body. Illustrated by Cases. By Allan Burns, Member of the Royal College of Surgeons, London; and Lecturer on Anatomy and Surgery, Glasgow. Edinburgh. 1809. pp. 322.

It is with pleasure we present these Observations to the attention of the profession; we have seldom read a work more replete with sound doctrine and general information than the one before us; and, under a conviction of its general utility, we think a medical library would be incomplete without it. But to give an idea of a work that will materially tend to facilitate the acquisition of morbid anatomy, and lead to a more certain mode of treatment in the diseases of this organ, we have selected Mr. Burns's observations.

"On the consequences resulting from change of structure of the substance of the heart.

"Mr. John Hunter very justly observes, that a heart cannot be essentially necessary for circulating the blood, in as much as some animals altogether want it. In the caterpillar tribe, we have no defined heart; there is no reservoir where the blood is collected to be delivered over in quantity to the arteries. On the contrary, the returning veins terminate directly in the artery which descends along the back of the animal; where it can, through the transparent skin, be seen contracting on its contents, forcing them on with an

undulatory motion. When we ascend a step higher in the scale of being, we meet with an imperfect heart, and in some tribes, we see this heart entirely appropriated to the pulmonic circulation, the systemic being carried on as in the caterpillar, by the arteries. In other varieties, the arrangement is recorded; we find no heart for propelling the blood into the pulmonary vessels, but we perceive, that these vessels deliver over their contents to a heart which is attached to the systemic arteries. The fish has a pulmonic heart; the snail a systemic one. These were facts with which Mr. Hunter was familiar; I cannot therefore conceive, what led this distinguished physiologist to conclude, that in the human subject, the ventricle sends the blood through the body, and is therefore the proper heart, while the auricle is only an appendage. Having once embraced this notion, he observes: "And as the ventricle is the part, which propels the blood to the different parts of the body, its muscular power must be adequate to that purpose, and therefore, it has a very strong muscular coat."

"To prove that the auricles are subservient to the ventricles, Mr. Hunter has stated, that in those animals where the veins near the heart are large, there is no auricle, and he has convinced himself, and endeavoured to persuade others, that the ventricle is more valuable than the auricle; because, when the heart is imperfect, we always find that the ventricle is the part present. I should be very averse to start objections to any of Mr. Hunter's opinions, for they are, in general, the result of cautious induction from unquestionable facts. Comprehensive and accurate as his views generally were, and elevated as his mind was above the level of most of his predecessors, still it would have been expecting too much to have looked for absolute perfection in all his opinions; although most of them have stood the test of the strictest criticism, and are now considered as axioms in medical science. In appreciating, however, the

relative value of the different parts of the heart, and even of the heart itself, with respect to other parts of the system, I think he has erred. For, although we regard, in general, the ventricles as stronger than the auricles, we must not from thence conclude, that this is because the ventricles in a state of health are "the chief agents in the circulation." Until we possess clear notions respecting the natural function of a part, our ideas concerning its morbid actions can never be otherwise than vague and unsatisfactory. But often our opinions regarding healthy function are corrected, by observing what takes place in disease. In the present instance, it is principally by attending to the deviations from the natural condition, that we come to a knowledge of the true relation which the heart bears to the sanguiferous system."

"We may be still more certain, that the heart does not circulate the blood, from attending to what often takes place, where the aortic valves are ossified. It is a fact well known, and fully substantiated by observation, that in this disease the heart contracts sometimes twice for each pulsation of the arteries, which could not happen, if in reality the heart by the *vis a tergo* drove on the blood. On the contrary, when so small a quantity of fluid is sent out from the ventricle, that the artery is not fully filled, it does not re-act on its contents, till the next contraction of the heart fills it; then it acts, and then the pulse is again felt. If we would estimate justly the value of the heart, we must look on the auricles as reservoirs to the ventricles, and the latter again as serving the same purposes to their respective arteries.

"That the ventricles during natural circulation, by their percussion, drive the blood along the vessels, is hard to conceive. To my apprehension, they only propel it with due vigour into the arteries, and they of themselves circulate it. The cases which are afterwards to be de-

tailed, are clear and convincing proofs of this; and these afford an ample refutation of Mr. John Bell's conjecture, that the ductus arteriosus "gives the full force of the right ventricle to the blood of the aorta, in addition to that of the left;" for in them the blood was circulated without the aid of either ventricle. Some have said, that the parts of the aorta near the heart act vigorously on the blood, but that the parts more remote have need of the *vis a tergo* to drive on the fluid. If, however, it be admitted, and few will pretend to deny, that any portion of an artery can propel its blood independent of any impulse communicated from the heart, surely we may be allowed to infer, that the whole artery can do as much; so that a vessel thirty-six feet in length, shall be just as capable of propelling its contents, as one of a single foot.

"It may naturally then be asked, why have we both an auricle and a ventricle, if the circulation can be carried on without either? In reply, I would observe, that according to the scheme of the perfect circulation, both parts are necessary. No doubt, we see in the lower ranks of the creation, that the animals do equally well without a heart as with one, or with a single, as a double heart. The caterpillar without a heart discharges in perfection all its necessary functions; and the fish, although it has no heart to propel the blood through its long and flexible body, yet circulates it with ease and regularity, by the sole unassisted action of its vessels. In none of these animals, however, do we find the functions so complicated as in man; their wants are few and simple; their mode of life and œconomy are fitted to their inferior rank in organization. Man, however, has other functions to perform, and other relations to maintain, and for the discharge of his multifarious duties, the structure of his frame requires to be more complicated; yet it is only so

much so, as to fit him to hold the station which has been assigned him, in the scale of created beings.

"In the caterpillar, and its tribe, the body is small, and the vessels comparatively large; so that in them, there is no necessity for a reservoir to collect the blood, and to propel it into the artery in sufficient quantity to distend it canal. In the human subject, however, from the proportion which the vessels bear to the body, a heart is rendered necessary; a reservoir is required to collect such a quantity of blood, as, when impelled into the vessels, shall let them feel that they are in some degree distended. Besides had there been only an aorta, and veins in the human subject, the blood could not of necessity have circulated an equal number of times in a given period; neither could the pulsations have been equally frequent, if he had only had an auricle appended to his sanguiferous system. To circulate the blood sufficiently, frequently, and harmoniously, an auricle and ventricle are both provided. The auricle dilates, is filled, contracts, and propels its contents into the ventricle, and while the latter is acting on the fluid it contains, the auricle is again filling, and by the time that the ventricle is emptied, the auricle is ready to contract; thus the vascular system is always kept full, for the heart sends out just twice the quantity of blood, that it could have done with the same exertion, had there only been a ventricle. In this mechanism, I see a beautiful contrivance for furnishing such a quantity of arterial blood to the system, as shall be sufficient for its wants; but I cannot do otherwise than believe, that so long as the heart and arteries continue healthy, they act in a manner independent of each other; each performs its own part, but both tend to the same purpose; unity results from their action. Still without being immediately fatal, one part of the heart may lose its muscularity, or the arteries may have their power of contracting greatly impaired. In the first instance, however, that part of the

heart which remains healthy, performs, besides its own functions, a considerable portion of the action belonging to the part diseased; and in the latter case, the heart is compelled to act with redoubled vigour, for in proportion to the loss of arterial power, so is the heart called on to make up the deficiency. The circulation can in either case be carried on, but the vascular system is in a precarious state; very trifling causes derange this mode of circulation; nay, in some cases, put a final stop to it."

The Physician's Vade-Mecum; containing the Symptoms, Causes, Diagnosis, Prognosis, and Treatment of Diseases. Accompanied by a select Collection of Formulæ, and a Glossary of Terms. By Robert Hooper, M. D. Licentiate in Physic of the University of Oxford, and the Royal College of Physicians of London; Physician to the St. Mary-le-bone Infirmary; and Lecturer on Medicine in London. 1809. Small 8vo. pp. 274.

Reviewing a book is, at any time, a painful task: for how seldom does it happen that an author thinks the man who takes upon himself to decide upon the merits or demerits of his work, to be actuated by pure motives or impartiality.

Dr. R. Hooper's book, we admit, is replete with erudition:—but we cannot help thinking it too much on the plan of a ready-reckoner:—In the mercantile world, it may be of advantage, for the dispatch and convenience of business, to have a book which may at once save much useless and tedious calculation, but in the science of physic, we fear it is otherwise. Dr. Hooper's intentions are certainly well meant, but we think that books of this class are already so numerous, that to multiply them is unnecessary. It rather tends to make the students, who are the general readers of them, idle, and to trust too much to the scanty and curtailed information they convey. Dr. Hooper, we believe, has been at much pains with this little volume; and he certainly deserves the character

of a laborious and indefatigable writer. His object is to furnish a set of school-books, which are always best applied when commented upon by the master. As text-books to his own lectures, they may do very well; but we think them not sufficiently extended for general perusal.

In looking over the work, we are sorry to be obliged to point out what we consider as a defect. In the enumeration of symptoms, he brings into his description every symptom which can arise, without specially dwelling on the leading or pathognomonic ones, and holding them to marked attention. We shall give an instance in his statement of catarrh, taking in the whole disease to shew his plan, though it is the enumeration of symptoms we chiefly object to.

"*Catarrhus, or Catarrh.*—Species. Catarrhus a frigore, common cold. —— contagious, the influenza.—An increased scretion of mucus from the mucous membrane of the nose, fauces, and bronchiæ, attended with pyrexia.

"Symptoms.—Pyrexia; weight and pain in the head;—oppression of the chest, and impeded respiration;—sense of fulness and stopping up of the nose;—watery inflamed eyes;—coryza;—cold shiverings, succeeded by transient flushes of heat;—soreness of the fauces and trachea;—cough;—pains about the chest; rheumatic pains in the neck and head;—increased secretion of mucus from the mucous membrane of the nose, fauces, and bronchiæ.

"Causes.—*Remote.*—Cold applied to the body;—contagion.—*Proximate.*—An inflammation of the mucous membrane of the nose, fauces, bronchiæ, &c.

"Prognosis.—It is seldom attended with danger, when in a mild form, and arising from common causes. *Unfavourable.*—Predisposition in the constitution to phthisis;—tendency to asthma, or peripneumonia.

"Treatment.—*Indications.* To reduce the febrile action of the system.—To allay the irritation of the affected parts.

"General bleeding may be necessary, if the type of the

fever be synochal, and the symptoms are violent: in such cases purges will be beneficial, saline diaphoretics, and the antiphlogistic diet, as recommended against synocha, or inflammatory fever.

" When the system evinces typhoid actions, the contrary must be observed.

" The second indication requires, 1. Frequent use of tepid diluents, mucilaginous and oily demulcents.—R. Spermatis ceti, two drachms—Vitellum ovi unius—Syrupi simplicis, half an ounce—Aquæ cinnamomi, two ounces— — distillatæ, four ounces.—Fiat mistura cujus capiat æger cochleare magnum frequenter.

" R. Olei amygdalæ, six drachms—Syrupi tolutani, one ounce—Aquæ distillatæ, five ounces— —— kali preparati, q. s.—Fiat emulsio cujus sumantur cochlearia duo secunda quaque hora, vel urgenti tusse.

" R. Mucilaginis Arabici, one ounce and a half—Aquæ cinnamomi, five ounces—Syrupi mori, one ounce—M. cujus sit dosis cochleare medium urgenti tusse.

" 2. Mild expectorants and diaphoretics.—R. Aceti scillæ, one drachm—Aquæ menthæ sativæ, five ounces—Syrupi croci, one ounce.—M. cujus sumat cochleare magnum quando raucedo urget.

" R. Oxymellis scillæ, half an ounce—Spiritus ætheris nitrosi, two drachms—Aquæ menthæ sativæ, five ounces—Syrupi corticis aurantii, three drachms.—Fiat mistura de qua capiat æger cochleare magnum subinde.

" R. Nitri purificati, one drachm—Lactis amygdali, seven ounces—Tincturæ scillæ, one drachm—Syrupi tolutani, half an ounce.—M. sit dosis cochleare magnum subinde.

" 3. Mild opiates and diaphoretics when the inflammatory diathesis is reduced.—R. Syrupi papaveris albi, one ounce —Nitri purificati, one drachm—Aquæ menthæ sativæ, six ounces.—Fiat mistura.

" R. Syrupi papaveris albi, one ounce—Oxymellis scillæ, half an ounce—Aquæ menthæ sativæ, six ounces.—Fiat mis-

tura cujus sumantur cochlearia duo magna tertia quaque hora.

" R. Pulveris ipecacuanhæ compositi two grains and a half—Conservæ rosæ, q. s.—Fiat pilula quarta quaque hora sumenda.

" The trochisci glycyrrhizæ cum opio.—R. Decocti hordei compositi, fourteen ounces and a half—Syrupi papaveris albi, one ounce and a half—M. cujus capiat æger ciathum vinosum parvum secunda quaque hora.

" 4. Blisters to the breast, if there be uneasiness there, or pain, or difficult expectoration, or sense of oppression.

" 5. Inhaling the steam of warm water."

Upon the whole, the book of Dr. Hooper may, it is true, be of great assistance to the young practitioner; but we believe of no real utility to the experienced professional man, whose proper *Vade-mecum* ought to be so much at his finger's ends as not to require the aid and information which this book affords.

II. SURGERY.

Among the objects of Surgery, the diseases of the genital system form a leading part, and are more frequent subjects of a practitioner's attention than any other.

The urethra in the male, as the passage to the bladder, or urinary organs, is subject to a variety of diseases from that source, independent of its other functions, connected with the purpoes of generation.

LACERATION OF THE URETHRA.

A remarkable case of laceration of the urethra is detailed with much interest and practical utility by Mr. Bellamy:

Robert Dainty, a seaman, of his Majesty's ship Glory,

on the 20th of May, 1806, fell from the gangway, across the gunwale of a launch along side; he was much shook, in considerable pain, and a little faint; but walked with a little help to the sick birth. On examining the perinæum, there was no appearance of injury, except a trifling fulness, and scarce any pain to the touch; he so soon recovered as to be earnest to return to his labour, which I would not allow, fearing more serious consequences; a large compress with saturnine lotion was applied, and strict rest enjoined. My fears were too soon realised, for in about an hour afterwards, on attempting to make water, he fainted away, and not one drop passed, and yet he felt the bladder empty; a greater sense of fulness occupied the perinæum, but as yet no appearance of swelling or fluctuation. Anticipating great inflammation, he was immediately bled, ad lbi. The cold lotion was assiduously applied, and an opiate given; two saline enemas were administered in the evening, which operated copiously; he had also a natural stool.

At 4 A. M. on 21st. v. s. ad lbi. He was confined to bed, and the scrotum suspended. This day no fever, but repeated the enema, lotion, and kept him very low; only a little tea, and that as sparing as possible, to prevent secretion of urine. He lies quiet and half asleep; occasionally a very sharp pain for about a minute in an hour, about the membranous part of the urethra; extremely acute, as if the urine came so far and went back again. To the question, if he felt a sense of water trickling through? He said, Yes, something of that kind. A considerable rigour followed his fainting; very much like Sharp's case. The perinæum soon began to swell, and the scrotum likewise, followed by discolouration, and rapidly extending in every direction, so as to become this morning one livid mass; the whole scrotum and penis swelling, and as it were filling out together; so also around the perinæum and tuberosities of the ischium, presenting a horrid appearance, like a part in a complete

state of sphacelus; but it is chiefly the effect of extravasation and the blow, and the suppression of circulation, from the quantity of urine insinuated into the cellular membrane. The prepuce is puffed like a large phimosis, or as in extensive anasarca of the penis; the glans is quite hid, and, in short, the whole of those parts are about six times their natural size. Perinæum very sensible to the touch, but no heat or tension; feels most like a bladder about half full; the region of the bladder is quite flat, and not sore, as if there was not a drop of water in it. From the first moment I suspected serious mischief, therefore acted as in a case of inflammation. It was now necessary to examine the state of the bladder, as he had not passed off any urine since 11 A. M. of 20th; the desire was continual, but every effort gave intense though not long pain in perinæum. Proceeded to ascertain the state of the bladder: at the first attempt it went very little beyond the membranous part of the urethra; felt some resistance; would not force, but withdrew the instrument; about two ounces of clear blood came off; a bad indication; shews internal rupture of blood- vessels; some clots also came off. The introduction of the catheter did not give much pain, and at the second attempt it passed easily its whole length into the bladder, but not one drop of water came off; a little more blood, then fainting, rigour continuing, and the swelling fast advancing. I still directed my attention to the effects of inflammation; determined either that the bladder is burst, or the membranous part of the urethra lacerated. He had drank about a quart since the last micturition. Feels a sense of water passing, and constant filling of the perinæum and scrotum.

Got him into bed; had a stool in the evening rather involuntary; I emptied the rectum also by a stimulating enema, and seeing the importance of an empty bladder in case of inflammation, passed the catheter a third time; no force required or resistance made, no urine flowed; continued a very li-

beral application of the cold lotion, and in the evening, when the circulation was restored from faintings, and having some fever, and a little fulness of pulse; bled him ad one pound. Rep. enema, and gave opium, gr. 1.

" Has had several slight rigours, and as his pulse is still full, bled again this morning, ad one pound, at 4 A. M. since which he has looked pale and weak, pulse small, soft, and not quick.

" Not a drop of water has passed, and bladder is quite flaccid; he feels about every hour the greatest desire to make water, and a few drops seem to pass through into the perinæum; and as this happens, so also the penis and scrotum distend, and also around the ischium, anus, &c. Except at these times of a few minutes sense of micturition, he lays pretty easy, and sleeps tolerably. What more can now be done, than first to obviate the danger of inflammation, which appears pretty well obviated at present; has no serious symptoms of fever, or pain in the belly; have less reason to fear rupture of the bladder, and increasing reason to believe that of the membranous part of the urethra; must wait, and persist against drink, although he begs and prays for it; as a great point will be to remove what fluid there is, and to prevent the accession of more, till nature can operate, if possible, some favourable change.

" Through this day I gave up the apprehension of ruptured bladder, and became confirmed in that of the membranous part of the urethra, in which part, at night, the swelling was larger, fuller, and more tense, giving the feel of extravasated fluid; by lightness, most probably water, dispersed in the cellular membrane; the scrotum full the size of a small bullock's bladder; no fever, and tolerably easy, except at the time of sense of micturition. In the evening additional confirmation, if any required, for now the scrotum is so distended that it is not able to bear any more, and

the region of the bladder above the pubis not a little distended, and become sensible to the touch, and his danger must rapidly increase, unless some evacuation be procured. Introducing two trocas in the depending and rather posterior part of the scrotum; a thin fluid oozed out, to the taste that of urine, and tinged with blood; secured the canulas, and got off before eight o'clock a full pint; of course, to the great relief of the patient, but yet no diminution of the size of the scrotum, because it filled up as fast as he feels the desire to micturate, but got off a pint and a half more to the evident great reduction of the bladder, and a little of the scrotum; about four ounces of blood mixed with the urine; one or two very slight chills in the night. Repeated the enema twice this day, and gave opium, gr. i. *vespere*. Enema feels comfortable, empties, even composes to sleep, though only of warm water.

" May 22. To assist the perforation of the trocar, last evening, I made a few pretty deep incisions with a lancet in the scrotum and penis, and all oozed something and helped the general intention. In the middle watch last night, another pint and a half dropped off, so that at 4 A. M. there was a striking flaccidity of the whole, especially of the bladder, but the parts are equally discoloured, quite black, and only sensible to pain about the perinæum; slept tolerably well; forbears drink; has not had above a pint since hurt, to 8 this morning. The reduction of the swelling continues, and if I can keep him from fluids, and he is an obedient patient, may hope, if the perforations continue to ooze, for a total reduction of the swelling; he evidently has no fever, or other mark of inflammation. I cannot always keep him parching with thirst, but I have done, I believe, all that is justifiable at present; and if I have obviated general inflammation, may have now to apprehend only local inflammation, and consequent fistula in perinæo; but there is also danger of gangrene, communicated inflammation, and the

great obscurity which all these parts, and the nature of their affection are wrapped in. I had an idea, if the plan of perforating the scrotum had failed, and the bladder had filled to excess, of peforating it; now to do that, the rectum is the east objectionable way; it would be a present indication of cure, for the water to flow that way, till nature, assisted by art, might restore the mischief in the canal. Repeat the emena twice a day, give opium gr. i. pro re nata; keep him low; keep the parts clean and cold by lot. saturn. At night looked rather sunk, and pulse weak; several rigours, and regular chattering of the teeth; scrotum and bladder kept well emptied, of course little or no oozing, only one pint the whole 24 hours; he cries out bitterly for a few moments, at each sense he has of the urine trickling from the bladder, which being an involuntary act, shews a paralysed sphincter; swelling just kept at bay by oozing, and the absence of drink. Can take no food; great distress from thirst; lips a little black, pulse regular in time, skin without heat, perinæum yet very full, hard, and all round to the anus the whole is black, but sensible in every part to the touch; the most sensible part has always been the right groin, and the side of the scrotum touching that part. By frequent rigours, I apprehend matter is forming in the perinæum; no hiccup nor mortification; thus may hope for formation of abscess, and fistulous opening for the urine, as the only probable chance of saving him. What if an artificial opening be made on purpose? but cannot tell the exact place; may do it below the wounded aperture, and communication with the cellular membrane; besides, why not hope to restore the urine to the regular canal? for if lacerated on the lower side, it does not follow, when all swelling and inflammatory thickening and obstruction are gone, that the urine should not pass on through the regular canal. There has also been a glary discharge for some time after the accident, which I

attributed to injury of the prostate, but now in the form of matter, and is rather putrid; some confirmation of the hope that matter is forming; remember the state of such discharge from Sharp, whose case was not much unlike it, and relief given to the narrowness produced by former inflammation, by the formation of abscess and fistula, and so might have lived, though a burthen, many years, if not for that unlucky secondary inflammation and gangrene; such will be the course here, either abscess or mortification, and to day 23d, by the severity of rigour, strong chattering of teeth, and more frequent recurrence, at least a dozen since 8 o'clock last night; hope for the formation of abscess in perinæo, which part continues very full and hard; not yet fluctuating, whereas all the rest remain lax, and very little larger than nature, and now able to draw back the prepuce. Matter oozes from the penis still, with a little blood; all the effect of the great bruise, giving hopes of matter forming there; injecting some warm water into the urethra, does not return, which confirms the opinion of the rupture of the membranes of the urethra, and that the water escapes into the cellular substance; must therefore be cautious how I repeat the injection.

" Last evening he seemed to sink a little, very weak and pale, looks low to day. Allowed half an ounce of wine four times a day, just to keep up strength and tone, also a little soup; had yesterday about a gill of soup, and in the whole twenty-four hours about a pint of fluid; in fact, just as much as I think will ooze off, and keep the parts empty; some acid eructations, but no hiccup. Some fear of gangrene, because less pain in every respect, and particularly in that of water going through; does not cry out so much as he did. Apply large hot poultices to perinæum, and suspend scrotum well; continually apply hot fomentations to region of the bladder; last evening took an early hint by seeing a greater occurrence of rigour, and hopes of matter, to leave off repellant and cold system, and began warm fomentations,

which felt more comfortable, and necessary to encourage circulation in the parts so relaxed, and for fear of gangrene; shall also give a cordial in small form. Confect. aromatic gr. x. augendo de die, because most afraid of debility; thirst is highly distressing, but must persist against drink.

" 24. On the whole is worse, in great danger, scarce possible to live; the danger of gangrene has greatly increased; by noon, yesterday, the eructations amounted to hiccup, which has increased so as to shake and hurt him much; has had at least twenty fits of it; face sunk, eyes deadly; pulse, though regular in time, is weak; skin cool, tongue brown and dry; lips and teeth somewhat black; no head-ach; and again, contrary to mortification, there are strong signs of inflammation and formation of matter; rigours much stronger and longer, till 8 last night, since that slower and weaker, but yesterday very severe, by regular chattering of teeth; very distressing, yet he got a little sleep. I have continued strictly a large hot cataplasm and fomentation to the whole pubes, scrotum, &c. which ease and soothe; most of the orifices continue to ooze, but not equal to fluid taken, which was rather more indulged yesterday, on account of his cries for it, and to be allowed more freely; after a most pleasing circumstance, at 2 P. M. of passing the catheter, a very small one, pretty easily, when at the part supposed to be injured, and kept the point of it bearing on the upper side of the canal, for fear of entering the lacerated part, but it went completely in, and drew off a whole pint of water, to my great satisfaction and his delight; though by the uneasy position he almost fainted. Bladder did not feel, or appear to be full. I began to pass the catheter chiefly with a view, by gentle means, of ascertaining if any, and where, the obstruction might be, as also to induce a true passage by keeping it open, not unawares of the danger of exciting new inflammation. Scrotum had not enlarged, though felt harder, and believe it mostly to be by the water from the small syringe,

injected to wash out matter and mucus, with a little blood from the penis; no water returned again when done last night, and scrotum seemed to get harder still; to be more backward in its use, especially if I can succeed occasionally passing the catheter, then may hope much, if gangrene does not advance; but loss of strength, faintness, hiccup, black tongue, &c. are strong and dangerous signs; no delirium, but loss of spirits; feels dejected, and says, now is very ill; is very fretful. At night got worse; much pain in bottom of belly, no doubt from inflammation there; still directs chiefly to the right side of inguen, just above the pubes, where to day there is an evident swelling, very distinct from the bladder, and remaining after its evacuation, which was repeated this morning very happily, but not half a pint drawn off, yet the bladder seemed emptied by it, although so much more has been drank; this I account for by the greater oozing from the perinæum, where, on the left side, I made last night a deep incision, to ascertain if any matter; found none. Integuments very hard, by thickening; incision about half an inch long. I foresaw this advantage, if no matter was found, that by oozing of urine and blood, there would be a diminution of tension, hardness, fulness, and redness of that side; besides, having now access to the bladder, there appeared a diminution of all danger, but that of gangrene, and even of that, if I can keep up his strength without exciting inflammation of the bladder, or urethra; so must cautiously support and stimulate, to encourage maturation of the perinæum, by cataplasm and fotus. This may lessen a great cause of extensive irritation and mischief from effusion of urine, if I am so happy to continue drawing it off, which I could not do at four this morning. At twelve, after being dressed, he expressed great uneasiness, and sense of fulness of the bladder, but to external feeling not distended; greatest distress, tension, and pain is in the right inguen.

" At 4, resistance to catheter, but not prudent to employ force. Gave opium two grains, last night, but scarce slept; and the distress and restlessness for drink was so great, was obliged to increase the indulgence; in the last 24 hours has taken three half-pints of tea; he looks forward to the hope of satisfying his thirst, as the greatest possible blessing.

" At 9 this morning, after a few attempts with great caution, a very small catheter got in, but not the whole length, little farther than neck of the bladder; yet so opened it, at least the obstructed part, that the urine flowed freely: now it may be that the urine is lodged without the bladder, and stopped by the lacerated part externally, where closed by inflammation, thickening, &c. He strained and vomited a little last night; not to day; and has kept down a gill of soup; also confect. aromatic gr. x. quart horis. c. vin. half an ounce, with about four ounces of lemon juice, and as much wine besides. Seeing the great good of the last incision in perinæo, made a still more ample one on the other side, close down to the muscles: he slept a little to day, since water evacuated, and took a cup of tea; also last night a few ounces of gruel, and a tea spoonful of brandy in it.—No fœtor from the scrotum, and not vesicated or having any more putrescent appearance; rather wonderful with all the rigour, hiccup, &c. that a crisis has not taken place. To check hiccup, and stimulate gently, though it will excite water, yet given because it will at the same time cool, and be anti-putrescent, kali gr. v. in effervescence with acid wine alternately every two hours, with confect. aromat. in vin. one ounce singul. dos.

" R. Catap. fotus, &c.

" 25th. The poor fellow is closing his sufferings fast, they have been immense, but now less by the relief of delirium; he is so restless, that it is impossible to steady him; cannot now keep on any dressing, but have hitherto persisted in the use of cataplasm to perinæum and inguen, but on the

latter the weight of it is too great; the part is so extremely sensible of pain, equal to touching the eye; kept tolerably composed, and had some sleep after drawing off about a pint of water yesterday.

" At 4 A. M. took some tea at breakfast; felt refreshed, but the fever continued. Teeth quite black, tongue dry and brown; less hiccup all day; one or two slight rigours only, but state of parts worse, now in solution and perfect gangrene, but uo fœtor; to day one spot, half dissolved, and breaking through at the bottom of the scrotum; it is altogether a most dreadful case of extreme anguish; so as to produce in a most firm mind, frequent restlessness and delirium, yet at times he is rational and patient.

" I have succeeded, by great pains, in the application of the catheter, in drawing off, at three different times, three half pints of urine; but the canal is full of interruptions, as if closed by inflammatory thickening, especially in the membranous part. We come now to a new view of the case. The part he has always most complained of, was the right inguen, which yesterday appeared fallen, but by noon it became rather red and hot, more prominent, and extremely sensible to the touch; this redness, fulness, and degree of pointing by the pink colour of the centre, has gradually advanced.

" There seems to be a general and deep thickening through the whole depth of the parietes of the abdomen, and I doubt not the explanation of all the rigours, internal pain, &c. is to be found in distinct inflammation of the coats of the bladder; feel assured that if he could live long enough, should see suppuration of the bladder take place. But I anticipate that he is very soon, at all events, to finish the sum of his sufferings, as great as ever I beheld. We recollect how soon Sharp sunk under a nearly similar state; with the extraordinary combinations of inflammation and gangrene at

the same time; there is excessive pain, heat, redness, rigours, disposition to suppuration, and actually local inflammation, whilst some parts are half putrid, and all along, since danger, a slow fever: black teeth, dry brown tongue, and small pulse, cold skin, hiccup, discoloration; not all the effect of bruise and extravasation of blood and urine; it is truly a fit case to be compared with Sharp's. In passing the catheter, not much pain expressed, which would be if the bladder was inflamed. Dissection would be highly explanatory and useful, as I had so much more pain in evacuating the bladder, and as thirst was his greatest distress, and had yesterday indulged him in various fluids, such as tea, succ. limon. and every two hours vin. one ounce, c. confect. aromatic and kali pp. as also with some soup, and a little wine occasionally. He often felt faint yesterday, and in the night, and once greatly so at 2 A. M. appeared to be going off; on the whole it appears vain, farther to try any means of cure. Keep him as clean and quiet as possible, indulge his desire for drink, which has not been evacuated in proportion to what he has received; and as the scrotum was very tense, though not so large as formerly, yet I made several deep punctures in the scrotum last evening, from which there was a considerable oozing; this will allow the freer use of fluids, which appears to be his greatest consolation; and a mercy now to let him die as easy as I can.

" 26. The poor fellow can scarce be said to be alive, and has not had a rational interval since 6 A. M. yesterday; the restlessness is immense, it is impossible to keep on any dressing. The eye became fixed about 4. Pulse gradually fell, scarce perceptible, body stretched out.

" At 9, breathing laborious, and he was thought to be going off, but pulse got up again, and he seemed to be better the rest of the day; there was also more heat of the body, even of the feet than for two days past; which, with moisture

of body, as is often felt before the last period, and which, to one unexperienced, might lead to an opinion he was better, but it is only the last effort and labour of nature.

" 27. He survived all yesterday till 7 P. M. when he breathed his last very quietly.

" I proceeded to dissect. The first object was to ascertain the nature of the swelling of the groin; it was nothing more than extravasated urine, which the scrotum was not able to hold; it was evacuated upwards, only under the integuments a few ounces lodged there, and the cellular membrane was dissolved and corroded by it, and gangrene also; so that the extreme sensibility there was the effect of inflammation of the integuments; muscles, though thicker on that side, not decidedly inflamed, nor was any of the peritonæum attached to the bladder; found the bladder sunk deep in the pelvis, small, and hard, partly solid, and partly of that thickness produced by inflammation; its fundus externally red, not a drop of urine in it, firmly united, but not so strongly as Sharp's, by adhesive layers, but yet very firmly to the peritonæum behind, and on its sides, and to the arch of the pubis. The next object was the state of the scrotum; integuments gangrened, the dartos was covered with fœtid matter, and nearly black, mixed with serum, urine, and blood; so also the same kind of matter beneath all the parts which were dissolved.

" This layer of matter, supposed to be the cause of the repeated and severe rigours, but undoubtedly many of those rigours also attended as indicative of the great inflammation; for the integuments of the scrotum did not seem to have run into gangrene, as the effect of inflammation alone, but mostly, perhaps, the effect of extravasated blood, and disorganization from the fall. Tunica vaginalis thickened, and firmly united to septum scroti, but bodies of testes natural; so was also the cord. Now the great point is to refer to the perinæum; I dissected off the integuments cautiously,

exposed in the anterior part (speaking as a body is usually placed for such dissection) of the membranous part of the urethra; an aperture decidedly not made by the knife; it has all the appearance of an old hole, about the size of a small oblong bean. I had previously introduced the catheter as far as it could go, but not into the bladder, even now after death; it appeared to be stopped by the neck of the bladder. Here was a full explanation of the cause and nature of his disease. In proceeding to take out the bladder, and dissecting the sides of the urethra, where it attaches to the arch of the pubis, found, on the right side, the knife unexpectedly to slip into a large cavity, exterior to the pelvis; when, by taking off some of the integuments of perinæum, and towards the anus, saw a distended layer of the membranous part of the urethra, to the size of a small hen's egg; it was soft, and so putrid that it would not bear the knife, and being then accidentally divided, a few ounces of urine came out; so this part had formed a sac for urine, the parietes of which were formed above by the still remaining entire side of the urethra, till it came to the immediate laceration spoken of, which was rather on the left side; here the waters first escaped, since that, gradual solution of the inflamed sides of the urethra has gone on, so that at last inferior parietes of the sac were formed rather by the perinæum itself, which alone suspended the urine there lodged; this decay has been the work of the inflammation, and consequent gangrene: had it fortunately terminated in abscess at first, as was hoped for, fistula in perinæo might have saved him; but the contusion had been too great, and there was no indication for making an aperture in perinæo, for want of a place indicated; as also the state of the parts forbid it; moreover, till the last day, after the first inflammation, the urine had been evacuated by the catheter; in short, it appears, in my opinion, that nothing could have saved him.

" Compare this case with that of poor Sharp; it is sin-

gular that I should have two such, so quick, and so highly important, interesting, and unfortunate in their consequences. In this case I would presume to fix the attention of the practical surgeon on this grand and leading particular; that when the urethra is divided, the passage of urine through such aperture, will not be a remote and secondary consequence, but a primary and immediate effect."

HYDATIDS OF THE URETHRA.

A SINGULAR disease that sometimes occurs, though rare, is hydatids of the urethra, and the following instance of it is recorded by Mr. Kenworthy:

"In August, 1808, I was requested to visit a man in the poor-house of Saddleworth, about 45 years of age, who was suffering excessive pain from long retention of urine. I immediately introduced the catheter, and drew away about two pints of high-coloured fœtid urine, which produced the same glutinous effect, as it dried on my hand, as a weak solution of gum arabic or glue. During the time of its flowing off, I several times applied the tip of my finger to the mouth of the catheter, for the purpose of preventing faintness by its sudden discharge. When the bladder was completely emptied, I questioned him particularly respecting the progress of his disease, and he informed me, that upwards of three years he had been troubled with uneasiness in the urinary organs, which had never, during that time, entirely left him; such as a frequent and ineffectual desire to make water, pain in his loins and throughout the hypogastric region, with other symptoms of disarrangement, which had gradually increased during the whole of the time. In the early stages he had no sickness, heat, nor thirst; but, towards a later period, he had frequently, after using an increased exercise, or change of weather, suffered from the characteristic symptoms of sym-

pathetic inflammatory fever, from which I suspected that some latent inflammation had been carried on; the testes were frequently painful to the touch, and particularly, when he had more uneasiness in making water, they retracted very considerably; there was a numbness in the buttocks extending down the thighs; and within the three or four months preceding the time I first saw him, he had suffered exceedingly from nausea and vomiting; feverish symptoms and restlessness, and an excessive and frequent desire for micturition, which induced him to strain so violently at times, as to force the rectum down to the extent of several inches. He informed me, that in June he had been examined by a Mr. B. who sounded him, and gave it as his decided opinion, there was a calculus in the vesica urinaria; he accordingly ordered him to Manchester Infirmary for operation, the man not being capable of discharging the expenses likely to be incurred; but as the surgeons of that institution could not possibly discover any thing of the nature of a stone, he was consequently returned without operation.

"While yet the catheter was retained within the urethra, I endeavoured to examine whether there was any extraneous body lodged within the vesica urinaria, and in passing the point of the instrument carefully in different directions, I discovered a tumour of considerable magnitude, attached near to the neck of the bladder, of a rather soft consistence, yielding to the point of the catheter, without inducing the least pain. The cause of retention was evidently mechanically effected by this preternatural growth, acting as a valve. Pursuing my examination, as to the bulk, form, &c. of the tumour, I accidentally ruptured one side of it, and a large quantity of hydatids, from three-fourths of an inch diameter to the size of a pin's head, were slowly discharged through the canal of the urethra, perhaps to the amount of three half pints. I ordered him the following mixture:

" R. Ol. amygdal dulc. Mucil: g. arab. aa. six drams. Tinct. opii gtta. thirty. Aquæ distillat. four ounces and a half. M. signa. Capt. cochl. major. ij. 3 qq. hora.

" The pubes and perinæum to be fomented with warm water; confined him to a recumbent position, and directed the use of infus. simenis lini, together with a diet of milk, broths, &c. He continued in this course about a fortnight; he has suffered no material inconvenience since, and now enjoys a good state of health, except, that at times he feels a slight uneasiness from excess of exercise, or the variations of the atmosphere."

TINEA CAPITIS,

We have already stated, in a former Number, is a disease which often disappoints the practitioner in its cure. A successful method is pointed out by Mr. Morison, of Dublin, in the following case :—

" The friends of B. D. aged about 16, made application to me concerning his disease, which was a case of inveterate Tinea Capitis, attended with those troublesome symptoms observable on such occasions; such as extreme itching, heat, &c. On a minute inquiry into the progress of this formidable complaint, I was told, that he had applied to every medical and surgical advice that this great metropolis could afford, without the necessary relief, and that it had continued uninterruptedly for about four years.

" When I carefully examined the parts affected, I perceived the entire scalp to be overspread with a loathsome incrustated appearance, and that it emitted, at the same time, a singularly offensive fœtor; there was, moreover, a disposition to debility in his habit of body; the digestive powers were much impaired, and many predisposing marks of a scrofulous constitution were apparent.

" Though an intimate acquaintance with the structure of

the human body is indispensably necessary to qualify a man for becoming a good surgeon, yet many who are not adepts in anatomy may be instructed so as to assist their fellow-creatures in cases of emergency. The operation for perfecting a radical cure in cases of tinea capitis, I have seen performed by persons unacquainted with the profession, and with amazing facility.

" I gave directions to the subject of this case to have his head as closely shaved as was possible, and in such parts thereof as the razor could not touch, the scissars was necessarily substituted; a common poultice was then applied over the parts affected; at the same time my patient was advised to call upon me in the course of a few days.

" When he came as instructed, I observed that the poultice had effected its purpose, so far as to render soft the incrustation; yet it exhibited a very foul appearance, and with little or no diminution of fœtor; also, the scabs continued to rise higher and thicker above the surface.

" After another careful removal of the hair, and the head being well washed with warm soap and water, I applied the paste compounded as below, and spread on strips of strong linen: Of yellow resin, two ounces; of best ale, one pound; of the finest flour, three ounces. To the melted resin, add the ale and flour gradually, the two latter ingredients having been previously intermingled in a bason together.

" Each morning I removed the paste, strip after strip, which gave, on the first applications, some degree of pain and uneasiness. It was also attended with a slight effusion of blood; yet he told me, with much satisfaction, after its removal, that his head was much easier than he had remembered it since the commencement of the disease.

" I cautiously and attentively, for three weeks, removed and re-applied this adhesive paste, observing that my patient was less affected with pain after each succeeding application: I also, with a pair of scissars, clipped off the hair

which began to grow, and gently separated such rising parts as might prevent the adhesion of the paste. From the first application to that period wherein I could pronounce a perfect cure, the effusion of blood was observed to diminish gradually, that had issued on the first dressings, and all other appearances proceeded favourably.

" Some years ago, I inserted a paper in the Annals of Medicine of Edinburgh, on the foregoing disease, which has since been transcribed into the fourth edition of Doctor Underwood's Treatise on the Diseases of Children. In that case, with the account therein given of its radical cure by the above paste, I perceive, what must have been *an error of the press*, the yellow resin is directed to be added to the other ingredients; the intention (according to the rules of pharmacy) was to have the *resin* first dissolved, and to add the thinnest part of the ale and flour gradually; continually stirring it in a brass skillet, on a brisk fire, until the whole be perfectly incorporated, and assume a thick gelatinous appearance.

" The paste was directed to be spread as above and renewed each day, whilst, at the same time, the head was to be rubbed well with a coarse cloth, towards the termination of the disease. By this mode of procedure, I have radically cured, in about eleven years, forty-eight patients; and, as far as I can understand, not one of them has had the least return of the complaint; they most generally enjoy good health, and have remarkably fine hair."

We are sorry to observe, that we do not conceive that the above paste can be formed. That the only effect which the ale can produce must arise from the alcohol, and, therefore, that the preparation may be made in a much easier and even more effectual manner.

ON THE REMUNERATION OF MEDICAL MEN, AND THE PROPRIETY OF THE LEGISLATURE ENACTING CERTAIN REGULATIONS ON THAT HEAD.

To the Editors of The Medical and Surgical Spectator.

Gentlemen.—The profession of medicine is properly a liberal one, and in the exercise of it is often too liberal an one; for it must be allowed, there is not that remuneration attending its services which is paid to the labours of the law and the church. The care of the goods and chattels is repaid in a more munificent manner than the care of life and health, and the opening prospect of immortality, which the churchman holds forth, secures a better recompence in this world than what he often sets before his votaries in the next. The advantage to these professions arises from their being interwoven with the constitution of the country; the one being the guardian of property, and the other supposed to be of morals. The health and constitution is left out of the business as an inferior consideration. From this circumstance, the situation of the medical profession is rather a hard one. The fee of the physician is entirely a gratuitous business; and he can have no claim for his recompence but in the generosity of the patient; a generosity which is too often forgotten when the hour of pain is past. Law does not even sanction, or if he put in his plea, allow it to be made good. The surgeon stands much in the same situation. His claim can be disputed, and his science and operative dexterity pass unremunerated. The apothecary is the only one that is entitled to possess a legal claim, because, in the language of trade, he furnishes goods, and gives what John Bull considers as value received. He is obliged, therefore, to pay for what he terms the *Doctor's stuff*, while the knowledge and advice of the physician, and the manual skill of the surgeon, are weighed in a lesser scale, and, in his opinion, found wanting.

Would it not be to the honour and credit of the Legisla-

ture, that the medical profession were put under similar regulations with the other kindred professions of the law and the church. It would be paying a proper attention to the interest of the community, and it would be placing those whose care and skill are directed to the noblest of purposes, the relief of their fellow-creatures, on a more sure footing than they at present stand. While their privileges, as a college, are protected by royal charter, their remuneration is left to the whim and caprice of every one they attend. It is well known that neither generosity nor gratitude are qualities universally prevalent; and where they are wanting, and there is no compulsion, recompence may be forgotten, or justice both lame and blind on the occcasion.

We contend, therefore, that it would be an act beneficial equally to the community as to the profession, that medical fees were regulated by law, and that these regulations should extend to the three orders of the profession, in their separate departments of physician, surgeon, and apothecary. On the continent, the fees of the physician are settled by law, and the consequence of this is, that the public, knowing the extent of their expense, he is called in regularly on the most trifling occasions, and thus mischief prevented, either from neglect, from a dread of expense, or from passing into ignorant hands. In Britain, the same plan ought to be adopted, and the fees regulated by the value of money, as ascertained by the rates of living. Indeed, we are of opinion, such a measure should be concerted by the profession themselves, in a regular meeting of the physicians, surgeons, and apothecaries, in their separate capacities, and resolutions should be entered into by them of petitioning parliament on this head. Such a step would by no means be a bar to generosity. On the contrary, it would render it more striking, and satisfy the patient to what extent he was carrying it.

If one profession deserves to be liberally rewarded more than another, it is that of physic. When we consider the

anxiety that attends the conduct of a medical practitioner, the nice circumstances with which his reputation is connected, and the certainty of blame being attached to him, too often without a cause, from the caprice of the patient, and the slow progress that has as yet been made in this conjectural art; it may be justly said that the services of the profession cannot be bought too high. So true is the language of Johnson on this point, that, when speaking of medicine, he says, "It is the most disgusting of all professions, for it consists of a melancholy attendance on misery, a mean submission to peevishness, and a continual interruption of rest and pleasure."

Yet, instead of high remuneration, it will be found that the fortunes made by physic are few indeed; and that, after an expensive education and arduous study, to prepare for practice, a life is spent in pursuing the latter, without being able to retire to the *otium* with what may be termed bare comfort, much less *cum dignitate*.

On the contrary, the practitioner in law soon amasses, from his fees, a handsome independence, and while yet his powers are entire, withdraws himself from the bustle of business, and closes the evening of life in happiness, the fruit of industry, no doubt, but still of less anxious care than what has attended the life of the medical practitioner. A new system, therefore, should be adopted in physic; and, as the labourer is ever worthy of his hire, the profession should seriously apply to place themselves in a situation that they may know what they should receive, and also have it in their power to enforce it.

I am, Gentlemen,

Your obedient servant,

G. BAKER.

Salisbury, March 5, 1809.

ON THE MANAGEMENT OF THE TEETH, AND THE EMPIRICAL APPLICATIONS IN USE FOR CLEANING AND PRESERVING THEM.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—WHY the diseases and management of the teeth should be given up by the surgeon, and made a separate business, I cannot surmise. The dentists avail themselves of the influence of the surgeon, and make this branch of what is properly surgery, a lucrative concern, not only in their operations, but by means of their quack preparations for beautifying, as it is in fact, and preserving the teeth. The directions for the use of these are replete with the most ridiculous and unintelligible nonsense, written, I presume, to amuse the mind and catch the attention of the ignorant, and especially of the fair sex.

Placing myself in the situation of one who have a set of teeth, I suppose I may be allowed to consider the diseases to which they are subject, without incurring the imputation of presumption from these gentlemen. It appears to me that many of the diseases to which the teeth are subject, originate from a disordered state of the gums. The matter that collects in the teeth, scientifically termed by the dentist tartar, is evidently a morbid secretion from this part, in consequence of its inflammation, its spongy state, or its being detached from the teeth, the latter of which is the most frequent source of this collection. The brush and tooth-powder employed for the purpose of removing this matter, both tend to aggravate the evil, by detaching the gum from the teeth, and irritating its edges. Hence people, who are in the habit of using them, are obliged to do it every morning to remove the concretion that collects during the night. People, on the contrary, who are only in the habit of using a sponge and cold water, have no such collection. The gums are also less spongy, and their edges level with the teeth. The gums, judging from the firmness of their tex-

ture and vascularity, not only afford a great support to the teeth, but also give them nourishment; and if they be diseased, the teeth will be liable to assume the same state which the mechanical action of the tooth powder will accelerate. On examining a diseased tooth, we are certain always to find the surrounding gum either considerably abraded, discoloured, or soft and tender. The enamel of the tooth I believe to be principally or entirely supported by the gum, and if it be detached or irritated every day, a tooth will not be properly nourished, and caries will of course follow. Every tooth-ache I believe to be an inflammation of the membrane lining the socket, and this inflammation generally terminates in the formation of matter termed gum boil.

Dentists tell us not to employ acids of any kind, because they destroy the enamel; and if that be destroyed, caries will certainly follow. But I have known many people who have had their teeth broke off by accidents, which have not been succeeded by caries, and therefore I am inclined to doubt the veracity of this doctrine; besides, few chemists will allow that diluted mineral or vegetable acids (with which dentists are very free themselves) will act on a healthy tooth. If a person gently washes the gum three times a week with a little sponge (fastened to the end of a little ivory) moistened with an astringent tincture, as that of Rhatany Root, or Cinchona, he will find that his teeth will not only be firmer and sounder, but free from tartar and tooth-ache; and if he will take the trouble to examine the gums of those who have been in the constant habit of using powder and brushes, he will be convinced of their destructive effects.

These few hints are intended to lead persons to pay more attention to the state of their gums than to the teeth themselves; for, if the gums are kept healthy, an application to the dentist will seldom be necessary. It would be well,

then, that surgeons were in this department resuming their own rights, and treating the diseases of the teeth as a class deserving their attention equally with those in other parts of the body. Mr. John Hunter has shewn us, in his judicious treatise on the natural history and diseases of the teeth, that it is a subject worthy investigation, and had the outline he chalked out been minutely filled up, and studied more by surgeons, a door would have been shut against the deceptions of empirical pretenders. There is no dentist without his tooth powder or tincture, which are both considered as valuable secrets, though the first is generally an absorbent powder, as the scuttle-fish-bone, with a proportion of myrrh or other aromatic, and coloured with red, either with Indian pink, or sanders, to give it a pleasing appearance. The tincture again is a vegetable astringent, infused in spirits, either with tincture of myrrh, or bark, and containing a proportion of mineral acid.

I might enlarge on this subject, but I hope these few observations will answer the intention of calling the minds of the profession to so interesting a topic.

I remain, Gentlemen,

Your obedient servant,

Henrietta-Street, March 6, 1809. R. REECE.

Anatomico-Chirurgical Views of the Nose, Mouth, Larynx, and Fauces; with appropriate Explanations and References. By John James Watt, Surgeon. Together with an additional Anatomical Description of the Parts. By Mr. W. Lawrence, Demonstrator of Anatomy at St. Bartholomew's Hospital.—The Engravings executed by Hopwood, from Original Drawings, by T. Baxter. Folio. *Price 1l. 11s. 6d. plain, or 2l. 2s. coloured.*

The publications on anatomy have of late years much increased. Little, however, original has been added to our stock of knowledge on the subject, and the labour of

authors has been chiefly expended in elucidating some controverted points, and giving interest and importance to the study by their delineations. The author before us has selected certain parts of the body of high consequence, in order, by placing them in new positions, to elucidate more clearly their structure, with a view to render the seat of their diseases more distinct, and their treatment better understood.

The first plate exhibits an outline of the back part of the head, to shew the posterior position of the œsophagus and trachea, in points of view in which they are not usually taken by other anatomists.

The same plate is continued by a delineation, according to the natural appearance, done with care and fidelity, and equally creditable to the anatomist and engraver. The explanation of—

The second plate exhibits a front view of the same parts, first in outline, and then according to the natural appearance, the parts being cut open in such a manner as to give a clear and perspicuous view of the whole.

The third plate delineates a side view of the same parts of the human structure, and has equal merit with the former.

The fourth plate gives a view of some parts not so distinctly laid open in the former; continuing the former view, and the whole is finished by a brief demonstration of the organs delineated, and their functions, from the pen of Mr. Lawrence.

The anatomical demonstrations in this work are very minute, accurate, and well described. The explanation of the plates is by Mr. Watt himself. We can only say, if anatomy is to be learned by delineations, which we think is the best plan, the present publication has a title to stand high in point of beautiful engravings, accurate description, and prominent line of viewing the subjects. We

hope Mr. Watt will extend his present plan with equal fidelity and merit, and his subscribers, who are numerous and respectable, will not fall off from this first specimen.

III. MIDWIFERY.

As the class of slow labour is more perplexing to the accoucheur than any other, an acquaintance with the cause should always be studied early to lay down a proper mode of procedure. Many fanciful causes have been enumerated by authors, and among them has been stated shortness of the umbilical cord. The umbilical cord is indeed sometimes twisted round the child's neck, but rarely to that degree that it would retard the child's labour. The good effects of bloodletting, in slow labours, particularly in women of a tense fibre, and after a certain period of life, are well known to practitioners; and though this practice, as recommended on different principles from what direct us in this country by Dr. Rush, may be carried too far, yet a reasonable bleeding in a slow labour will do more to expedite delivery than any other means. This fact is strongly contended for by Mr. Brown in the following communication:

"Mrs. G. aged 32, a powerful strong woman, of large stature, was taken in labour of her first child, on Sunday morning, at four o'clock. When I saw her, at twelve o'clock, it was reported to me, that her pains had been almost incessant, and as strong as she could possibly support. Accustomed to these expressions, I did not at first much regard them; but I found the representation had not been incorrect, for the distress induced by the pains, and their frequent and apparent violence were fully corroborated by my own observation. The os uteri I found slightly dilated, rigid, and unyielding, and its cervix appeared constricted internally, as if by a ligamentous band of some breadth. From this period till

seven o'clock in the evening, in which time I saw her frequently, there did not appear any material alteration, excepting that the pains were more frequent, and the consequent distress to the patient greater, as the labour did not seem advanced by them. The os uteri, at this time, appeared dilated to nearly the size of half a crown, but equally rigid and thick as before, with the same degree of constriction at its cervix.

"I now determined upon bleeding, as the most likely means of diminishing those powers of resistance which prevented the progress of the labour. I took away twenty ounces of blood. Its first effect appeared to protract the recurrence of the pains, and to render their remission more perfect in consequence. The subsequent effect upon the uterus, was to relax the constriction and diminish the rigidity of the os uteri; so that each succeeding pain produced its proper effect. The relaxation of the vagina and os externum were in equal ratio; and by ten minutes past twelve the child was born. Considering the time of bleeding and that at which the child was born, it was not reasonable to expect that the result could have been more speedy or favourable.

"This being the first instance, in an extensive practice of thirteen years, in which I have resorted to bleeding under difficult parturition, its complete success induced me to believe that the publication of it might be useful to the younger practitioners of this island."

To the Editors of The Medical and Surgical Spectator.

Gentlemen—Were there no other objection to the use of the lever, in the practice of midwifery, and there are many, it might be strongly opposed upon the very ground, for which your correspondent, T. G. page 262, of your last number, chiefly recommends it, namely, that it can be used without the knowledge of the patient. I am sorry to find a

single line in your useful publication which can be supposed to countenance the very improper practice of using instruments secretly. The subject may be brought into a small compass: if instruments are not necessary, except to save the time of the practitioner, it is highly reprehensible to make use of them, even suppose they can be safely used: what then can we say when an instrument is recommended for common use, the management of which, according to your correspondent's own confession, requires great management and adroitness? If, on the contrary, a case in midwifery occurs, requiring the aid of instruments, it adds much to the reputation of a practitioner that he was able to conduct a woman safely through a labour attended with such untoward circumstances, so that he loses credit by using his instruments secretly.

No possible means exist of preventing the unnecessary and injudicious use of instruments, in the practice of midwifery, unless accoucheurs candidly state to the friends of the patient when they become indispensable, and apply them, not only with the consent of the patient, but with the approbation of the by-standers, who are, in general, much more ready to request that instruments may be employed, than the conscientious accoucheur is to have recourse to them.

Another correspondent, p. 259, supposes that the rigidity or thickness of the membranes, in some cases of labour, is to be remedied by blood-letting. The accoucheurs in France were formerly, and perhaps still are, of opinion that blood-letting might be usefully employed during labour, with a view of facilitating delivery: the same plan was occasionally adopted by Smellie and other English practitioners, and has lately been revived in America to an enormous amount, not for the purpose of relaxing the membranes, but for relaxing the soft parts of the woman, viz. the os uteri, vagina, and os externum.

The abstraction of blood for this purpose is, doubtless, sometimes useful; but the indiscriminate adoption of bleed-

ing, particularly to the immense amount we are told of in America, cannot be other than mischievous, of which some proofs may be collected from the American cases: but by what means the drawing of blood from the arm can take off the thickness and rigidity of the membranes, viz. the chorion and amnios, remains to be explained.

Your correspondent informs us, that he has seen a woman, who had lain *for hours*, with the *strongest* pains, without their producing the smallest effect, and after the os tincæ had been *fully dilated.*" This woman, on being bled to the extent of eight or ten ounces, was delivered in the course of a few pains. Now, I cannot conceive, after the os uteri is *fully dilated*, that the rigidity of the membranes can present an obstacle to delivery *for several hours*, while the *strongest pains* are acting, nor that bleeding is equal to remove such an obstacle if it did exist. The obvious remedy, under such circumstances, would be to rupture the membranes, which would be, at such a time, perfectly justifiable. But if the delivery were retarded by rigidity of the soft parts, blood-letting would certainly be the more appropriate remedy, and rupturing the membranes hurtful.

While I have the pen in my hand, permit me to request a more detailed account of the case of obliteration of the os uteri, spoken of in a former number. Was not this a case of retroversion of the uterus?

I remain, Gentlemen, &c.

March 3, 1809. OBSTITOR.

ON LACERATION OF THE PERINÆUM IN LABOUR.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—It is a point of practical midwifery not yet determined, what support should be given to the perinæum in labour, in order to prevent laceration. This part towards the termination, as the head advances, is more on the stretch than any other, and unless the progress of labour is gradual, it

is an accident which cannot fail to happen frequently. There are two situations in which it is more especially to be guarded against. The one is a first labour, and particularly where the patient is very young. The parts being both contracted, and not having the expansion of full growth, a rupture will certainly ensue, if the pains are strong and rapid. The other is where the pelvis, or bony cavity, is capacious, and well made, and where, from the violence of the pains, the head suddenly descends to the under part of the pelvis without making its common turns. In this case, it is often precipitated with such force as to be expelled through the perinæum, instead of the natural passage. An instance of this came under my care some years ago, where the head was at once precipitated through the perinæum, making a complete rupture of it without inclining to force its way through the natural passage. The rupture was afterwards healed, and in the succeeding delivery, which was not so rapid, the head was protruded at the natural opening. That some benefit may arise from giving some support with the hand to the part, I have no doubt. In giving this support, however, the pressure should not be so great as to bruise the part by the resistance which the head of the child will oppose to it. In other cases, this accident is the consequence of a diseased state of the part, which is unable to bear the force of the stretching power from the weakness of the solids, and accordingly gives way. Here the cure must be tedious, and such a state of the part may probably often be connected with a venereal cause. Partial laceration of the perinæum will always easily be repaired; but a complete laceration, extending to the anus, must always be tedious and troublesome in its treatment, and often incomplete in its cure. A young practitioner, therefore, cannot be too much on his guard to give every assistance to prevent, if possible, this accident.

I am, Gentlemen,

Your obedient Servant,

Bethnal-green, March 16, 1809. G. HART.

ON CONVULSIONS IN PREGNANCY.

To the Editors of The Medical and Surgical Spectator.

Gentlemen—One of the most alarming diseases of pregnancy is the occurrence of convulsions. They are here sudden in their attack, without any previous signs to indicate their approach; more rarely, however, they are preceded by a weight, or heavy pain, in the uterine region, such as marks distension.

This disease attacks in paroxysms or fits. They are generally preceded by violent pains in the head, varying in its situation; wild motion of the eyes, which roll in an uncommon manner in their sockets; and a general determination to the head, appearing from the flushing and turgescence of the face. In the paroxysm itself, all sense and motion come to be lost, and the face and some of the extremities, are distorted in a particular manner, while a frothy moisture issues at the same time from the mouth, and the tongue is forced out, or retained closely between the teeth, so as to suffer considerable injury.

That this disease in pregnancy is sympathetic, and arises from uterine irritation, is not to be doubted; but it remains a matter of doubt, whether in this case a fulness of the vessels of the brain necessarily attends this uterine irritation. Convulsions in pregnancy we find occur in very opposite habits; at one time they attack the robust and evidently plethoric, at another time they attack those of an irritable and debilitated constitution: hence we would infer, that a turgescence of the vessels of the brain, or an increased impetus of the circulation to the head, is by no means necessary to this affection; that, as the circulation is generally irregular in the time of the paroxysm, such an accidental plethora may occur. But, in the cure of the disease itself, it requires no primary attention; and that the uterine irritation, or original morbid cause, demands chiefly our attention. To re-

move this in absence of the paroxysm, venesection taking off the uterine accumulation, should be performed, and that even liberally; the intestines are then to be cleared, and afterwards a large opiate exhibited in glyster to the seat of the affection itself: the principal indication seems to be to restore the energy of the brain, and that by the sudden application of cold to the face. This is a practice recommended by Dr. Denman, and which he has found succeed after every other means, particularly bleeding, has been ineffectually employed. Bleeding, however, in all cases of pregnant convulsions, is found a useful palliation. It is recommended by every writer on the subject; and, among the French particularly, was formerly used in this disease to a most extravagant height; but, in delicate women, the after-consequences of such evacuations are to be considered, and, where the disease is mild, and approaches somewhat to hysteria, venesection should be very sparingly employed.

But this disease often arises from certain accidental causes, which cannot be relieved by the treatment enjoined: thus it sometimes depends on an improper position of the fœtal head, pressing on some part of the pelvis; or it is produced at times by an oblique position of the uterus, in some cases of distortion, where its expansion is prevented.

Where convulsions begin early in pregnancy, they are less to be dreaded; but in the latter months they are often alarming, and a single paroxysm has been known to kill.

In the convulsions of pregnancy, particularly where advanced, there is this peculiar circumstance, that the motion of the child is felt uncommonly strong;—a proof of that sympathy which subsists between the nervous system of the mother and that of the fœtus.

Some authors have observed, that convulsions at this period are more common to the inhabitants of some countries than others, and that they occur more frequently, for exam-

ple, in England than in Scotland. This fact, however, may be called in question; and I know, from some eminent practitioners, that in some parts of England a case of them is almost never known to occur.

How alarming this disease is in pregnancy; convulsions are no less alarming in labour, every appearance of convulsions in labour is to be considered as alarming. Their attack is generally sudden; and the symptoms preceding them are violent pain of the head (chiefly the forehead), staring or wild motion of the eyes, which appear red and turgid, and general flushing of the face.

The causes of this affection in labour may be reduced to three heads.

1. Morbid irritability of the os tincæ. Hence it is frequent in a first labour, and in this case a proof of it: the vagina too feels so painful and irritable, as hardly to bear examination.

2. Over distension of the uterine cavity. Thus it often occurs in case of twins, and affords, even before the delivery of the first, a proof of them.

3. Pressure on sentient parts sympathising with the brain. It is for this reason it is not uncommonly met with in preternatural cases.

Our prognosis in such cases is determined by an attention to three circumstances,—their *frequency*, *duration*, and *effect*.

With respect to the first, many have more than a single paroxysm without any repetition; others have them frequently in time of labour, as twelve in the course of eighteen, or twenty in the twenty-four hours, and that even without any danger; so that less stress is to be laid on this circumstance, and even the more so if the patient has been formerly subject to the disease, or to hysteria in a violent degree. It is surprising they often observe a periodical recurrence, or regular distance between the paroxysms, so that you can count on the repetition of their attack within a few minutes.

In regard to the second circumstance, or their duration, we observe that in some they last a much shorter time than in others. The symptoms also are in some less exquisitely marked, and approach more to the nature of hysteria, while in others the paroxysm is often so violent as to prove fatal at once.

The third circumstance, or their effect on the system after the paroxysm is finished, has been most generally attended to in forming a prognosis. Thus we find, that recollection in many returns as soon as the paroxysm is ended, or at least in a few minutes afterwards. In others the senses seem altogether suspended, when the patient either continues in a state of stupefaction, or delirium succeeds. In this last situation they generally, though not always, prove fatal.

A prognosis may also be drawn with respect to their influence on the labour itself. Thus, where slight, the labour-pains are generally assisted by them, or rendered more effectual. Where very violent, again, the child is either suddenly thrown off in a paroxysm, or the uterine efforts are entirely suspended.

For the treatment of convulsions in labour, two methods prevail, which in different situations are both equally proper.

The first is merely palliative, and trusts entirely to nature, after obviating symptoms for the accomplishment of delivery.

The other consists in assisting the palliative treatment, by the application of mechanical means, as soon as in our power to facilitate the progress of labour.

In executing the former, three indications come to be formed.

The first is to lessen primary irritation in the original affected part, which, being the uterus, we attempt it by a full dose of opium in glyster, at once taking off its irritability; and its effect in lessening the action of the uterus, in

these cases, where turning is required, sufficiently points out its propriety.

The second is to remove distension from the system in general, and particularly from the seat of the disease, which is best performed by copious venesection; and,

The third is to excite a more powerful and sudden irritation in the same situation. This is best and expeditiously executed by the appellation of cold water to the face, according to the practice of Dr. Denman.

I am, Gentlemen,

Oxford Street, Yours, &c.
March, 10, 1809. T. DEAN.

IV. PHARMACY.

Since the renovation of the digitalis, no active vegetable production has been introduced to excite experiment, or produce the tale of wonder. In our last number we stated having met with a new species of bark. This species has lately been imported from the Brazils, under the name of Cinchona rubra Braziliensis. It is paler than the red bark received from Peru, but very similar in its appearance, and not less powerful in its sensible qualities. It is very productive of resin, and in aroma it approximates very near to the old pale bark. Dr. Rush, of Philadelphia, has lately published some remarks on the Brazilian red bark, which tend to prove it equal to any species of Cinchona, and very superior to most employed in Europe, in consequence of which the expensive species of Peruvian bark are very rarely prescribed by the American physicians. A quantity of this species of Cinchona, in the hand of Reece and Co. is now supplied to the faculty, in order that it may undergo the trial to which its sensible qualities, and the testimony of Dr. Rush, entitle it.

MEDICAL INTELLIGENCE.

The Professors of the University of Edinburgh have this season not less than two thousand Students.

A tea-plant, three feet high, in the possession of Mr. Capel Lofft, of Troston-hall, near Bury, blossomed in the parlour of that Gentleman's house on the 18th December last, notwithstanding the thermometer, in a southern aspect, was at 28 degrees. The buds appeared early in September. The scent of the flower was delicate and evanescent, resembling that of fine green tea dried.

A Gentleman has discovered a vegetable product of British growth, which, by particular management, may prove an excellent substitute for foreign coffee.—This is the *iris pseudicorus*, flower de luce, or common yellow water flag; the seeds of which, being roasted in the same manner as coffee, very much resemble it in colour and flavour, but have something more of a saccharine odour, approaching to that of extract of liquorice. Coffee made of these seeds to the proportion of half an ounce, or an ounce, to a pint of boiling water, is extremely wholesome and nutricious.

DIED.—On Thursday, Feb. 16, at Andover, in Hampshire, Dr. John Hemming, formerly Physician to the Oscutton Dispensary.

Means of cleansing Houses, &c. of Rats and Mice. A plant, which grows in abundance in every field, the dog's-tongue, the *cynoglossum officinale* of Linnæus, has been found by M. Boreux to possess a very valuable quality. If gathered at the period when the sap is in its full vigour, bruised with a hammer and laid in a house, barn, granary, or any place frequented by rats and mice, those destructive animals immediately shift their quarters. The success of this method, M. Boreux says, is equally speedy and infallible.

Extract of a Letter from a Regimental Surgeon stationed on the coast—"At present I am so much engaged, that I have not time to take down a tenth case out of the many I am obliged to attend from morning to night, in the fever lately imported from Spain. We Regimental Surgeons here are half dead, two entirely from fatigue and fever."

Society for the Relief of the Ruptured Poor, No. 52, Wood Street, Cheapside, Instituted 1796.—A special general meeting of the Governors of this charity was held at the London Tavern on Wednesday the 22d of March, when His Royal Highness the Duke of Sussex, (pursuant to his polite offer,) was elected Patron of this institution.

Mr. Troughton also attended at this meeting as the executor of the Will of Mr. Kempenfelt, (brother to the late Admiral of that name,) and paid a legacy of three hundred pounds bequeathed by that gentleman to the charity, in aid of its benevolent intention.

On Wednesday the 8th of March, the Medical Society of London held their Anniversary Meeting at their house in Bolt Court, when the following Officers and Council were elected for the year.

President.—Dr. Lettsom.

Vice-Presidents.—Dr. Bancroft, Dr. Babington, Mr. Norris, Mr. Ware.

Treasurer.—Dr. Sayer Walker.

Librarian.—Dr. Clutterbuck.

Secretaries.—Mr. I. M. Good, Dr. Hamilton, Dr. Poignand. Foreign Correspondence.

Registrar.—Mr. A. B. Turnbull.

Members of the Council.—Mr. Andrew, Mr. Field, Mr. Chamberlaine, Mr. Hooper, Mr. Hurlock, Mr. Haighton, Mr. Abernethy, Sir John M. Hayes, Bart. Dr. Adams, Mr. Ring, Dr. Bradley, Mr. Seaton, Dr. Thornton, Mr. Griffith, Mr. Heaums, Mr. Robinson, Mr. Astley Cooper, Mr. Taunton, Mr. Macdonald, Mr. Hopkins, Mr. Young, Mr. Platt, Mr. Addington, Dr. Lidderdale, Mr. Ramsden, Dr. E. N. Bancroft, Dr. Lawrence, Dr. Shearman.

To deliver the Anniversary Oration for 1800.—Dr Birkbeck.

After the election, Dr. Sayer Walker delivered the Anniversary Oration on the best means of promoting medical science. A numerous body of the Fellows of the Society afterwards dined together at the London Coffee-House.

The Council of the Society have lately come to the resolution of publishing at short intervals, and with as much regularity as circumstances will admit, a selection from the communications laid before the Society, instead of waiting as heretofore for materials to complete a volume. This cannot

fail to be of great advantage to science and to the community, by the more rapid diffusion of those practical improvements which the inquiries of individuals are daily bringing to light.

Dr. Ramsbotham will commence a Summer Course of Lectures on the science and practice of Midwifery, and on the diseases of women and infants, on Monday, May 8th, at ten o'Clock in the morning, at his house, No. 9, Old Jewry.

The descriptive and physiological parts of these Lectures are elucidated by a reference to appropriate specimens of anatomical preparations from a very celebrated collection; and the practical parts are taught upon a well constructed machine, and by attendance upon cases when the pupil is properly qualified.

NEW MEDICAL PUBLICATIONS.

A Practical Materia Medica, in which the various articles are fully described and divided into classes and orders according to their effects. Their virtues, doses, and the diseases in which they are proper to be exhibited, are fully pointed out, interspersed with some practical remarks and some select formulæ. To which is added, a general physiological table, intended principally for the use of Students and Junior Practitioners, 12mo. price 5s. in boards.

A Dictionary of Practical Surgery, containing a complete exhibition of the present state of the principles and practice of Surgery, collected from the best and most original sources of information, and illustrated by critical remarks. By Samuel Cooper, 8vo. price 15s. in boards.

The First Lines of the Practice of Surgery; being an elementary work for students, and a concise reference for Practitioners, with copper plates; a new edition corrected and enlarged. By Samuel Cooper, 14s. in boards.

Observations on the Utility and Administration of Purgative Medicines in several Diseases. By James Hamilton, M. D. The third edition revised and enlarged, 8vo. price 9s. in boards.

IN THE PRESS.

Blair's Grammar of Chemistry, 12mo. price 3s. 6d. bound.

The paper on Medical Education, in our last Number, by Dr. John Reid, we are desired to state, was not his own, but the production of a friend. Coming inclosed from Dr. Reid led to the mistake.

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