THE

Medical and Physical Journal.

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To the Editors of the Medical and Physical Journal.

GENTLEMEN,

ABOUT six years ago I was induced to make use of a Bistoire Caché, in the operation of Lithotomy, such as had been previously employed in France by M. DESSAULT, and other surgeons. The operation being public, and terminating successfully, other surgeons were induced to adopt the same instrument. As time and experience have now seasoned this novelty in practice, and the instrument alluded to has undergone many improvements by Mr. Stodart, an excellent workman, who, by attendance on public operations, has added a knowledge of the application of surgical apparatus to his mechanical skill, I feel at liberty to state the reasons which led me into this deviation from established customs. The various alterations which eminent Lithotomists had given to the gorget, made me suspect the fitness of that instrument for its destination. The operations on the dead subject still more encouraged my suspicions. The conical gorgets were almost abandoned; and the tearing effects produced by them, were found to be sufficient objections among junior practitioners. The form and extent of the cutting edge of the improved gorgets are adapted to the taste of each operator. The obliquity of the angle, formed by the cutting end of the gorget with its barrel, has been also a subject of much variety. It would be very unprofitable, at this day, to enter into a history of the various modes in which Lithotomy has been performed, or the tools with which the operators have executed their work. Much experience has been already recorded, improvements have gradually been made, and we look back with thankfulness on those who have contributed to the preservation of human life; and with hope to those who may still assist in the alleviation of misery. It appears to me that one very desirable point in the operation of Lithotomy, is to make a rapid and clean cut opening into the bladder. The

gorget, with an edge at nearly right angles with the grooved part, is puſhed through the bulbous portion of the urethra, the ſurrounding cellular ſubſtance, proſtrate gland, and whatever portion of the bladder may be cut, with a direction of force like that of digging with a ſpade. If the patient ſhould be emaciated, and the ſurrounding cellular ſubſtance looſe in its texture, the bladder may be puſhed beyond the end of the ſtaff, before the tougher parts give way, and thus both apparatus ſlip between the bladder and rectum. I think that I have ſeen this happen under a very skilful hand. If the mechanical puſh required be conſiderable, the beak of the gorget is kept in the groove of the ſtaff with difficulty and uncertainty. When a gorget with a cutting edge at a more acute angle is uſed, there is danger of the point reaching the furtheſt ſide of the bladder, before the ſhoulder gets in; or, as has really happened, it may ſuddenly ſlip, by the unforeſeen yielding of the parts, and paſs through the back of the bladder into the rectum. It ſeems convincing to my mind, that theſe dangers and difficulties are removed by uſing the Biſtoire Caché. The operation being conducted in the uſual manner, and the groove of the ſtaff laid bare, this inſtrument is made to ſlide into the bladder without either cutting or tearing. When the ſtaff is withdrawn, the operator can meaſure the diſtance of the bladder, by feeling its poſterior ſurface; and pulling out a little, ſo that his knife ſhall clear that ſurface, he executes the dark and dangerous part of this operation by a clean drawing cut. The ſame parts are neceſſarily divided in this method as when the gorget is uſed, and no more. The advantages of it are derived from the certainty of opening into the bladder, and of the parts remaining in their places ſuffering only a ſimple inciſion.

As this account is only addreſſed to thoſe who are already inſtructed in anatomy and the operations of Surgery, it is not needful to add more.

Accompanying the paper is a ſketch of the Biſtoire Caché in its preſent improved ſtate. I am,

GENTLEMEN,

Your obedient ſervant

Soho Square, Feb. 1, 1800. ANTHONY CARLISLE.

REFERENCE TO THE PLATE.

Fig. I. The complete inſtrument.

A—The wooden handle carved to ſecure it from ſlipping.

B—A ſcrew, whoſe head is the prop of the lever D, attached to the cutting blade; and by raiſing or depreſſing this ſcrew, the knife is made to gape at ſuch a diſtance from the ſheath as may ſuit the age, &c. of the patient.

C—A ſpring which preſſes the lever D, outwards, keeping the blade within its ſheath.

D—The

to the axillary gland. At the end of a month from the firſt appearance of the ſwelling on the finger, it became ulcerated, without any previous regular ſuppuration, and the ſore had an ugly, ſpongy aſpect, with an irritable and extremely painful ſurface.

For three days previous to my firſt viſit, he had felt the ſymptoms of a low nervous fever; as, alternate chilly and burning fits; ſhort but profuſe ſweats; laſſitude; extreme depreſſion of ſpirits; and a ſlight delirium.

On firſt viewing the ulcer, I was ſtruck with the idea that it was venereal. But fever, which appeared to be connected with the ulcer, was thought to be ſo unuſual a connexion, as conſiderably to diminiſh the probability of ſuch a cauſe. The fever alſo formed a ſtrong objection to the uſe of mercury. My patient had an excellent underſtanding, and had been long engaged in extenſive practice. He very judiciouſly urged theſe points with me. Among other arguments, he obſerved that the ſkin where the tumor and ſubſequent ulcer had formed, had previouſly ſuffered no injury, but was perfectly ſound.

After diſcuſſing this point with my patient for about five days, during which the ulcer increaſed in ſize and ſoreneſs, I obtained his conſent to uſe mercury. But, juſt at this time (on the 30th of September) he had a violent ſhuddering fit, with an increaſe of his other febrile ſymptoms. A general efflorescence immediately appeared, and more particularly on the face, which had manifeſtly a venereal aſpect.

Such a formidable acceſſion of fever, at this critical time, induced me to ſuſpend the uſe of mercury till the 4th of October. During this interval of four days, the venereal blotches appeared, which clearly confirmed my former opinion of the nature of the poiſon. The ulcer rapidly advanced ſo as to endanger the loſs of two joints of the finger. To preſerve them, and the life of my friend, which at that time were both in the moſt perilous ſituation, the mercurial ointment was employed in larger quantity than, I believe, I ever directed in any other caſe. Salivation was excited. The ulcer healed in October, but violent ſhooting pains remained in the hand and arm.

At this time he was induced to attend ſome preſſing engagements in his profeſſion, though greatly fatigued with the leaſt exertion, and many of the venereal ſores, particularly on the face, were not healed. After going about for ſome weeks, he was ſeized with ſuch a violent pain in his legs and knees, that he could never obtain ſleep for fifteen minutes together. He had the firſt night of good ſleep in the middle of April, after a long courſe of mercury, and the compound decoction of ſarſaparilla.

It

It is hardly neceſſary to obſerve, that this long protracted diſeaſe plainly proceeded from the urgent profeſſional duties in town and country, by day and night, which my patient was anxious to fulfil, ſo as to interrupt the ſeaſonable and regular uſe of proper remedies.

The Second Case.

I was conſulted by another eminent Surgeon and Accoucheur, on the 9th of May, 1792. On the point of the fore finger of his right hand there had been a ſlight wound. For eighteen days it had gradually become a ſpongy and painful ulcer. In the axilla he had perceived a tumor which gave him conſiderable pain. He had chilly fits, with a ſenſe of much debility, being ſcarcely able to walk to my houſe.

On this occaſion I aſſured my patient that his diſorder proceeded from venereal infection. My opinion was deciſive; not only from the appearance of the ulcer, but was much ſtrengthened and confirmed by my experience in the former caſe. He argued, and judiciouſly, from many ſymptoms which he enumerated, that he had a typhus fever; he aſcribed it to ſome putrid abſceſſes which he had lately opened. In conſequnce of this idea, he thought that bark and wine were his proper remedies. With opinions totally oppoſite to each other, we ſeparated; but he ſoon returned to me, and conſented to begin a mercurial courſe, with a decoction of ſarſaparilla. I have reported in my caſe book, on May 27th, that he had uſed the remedies, but not regularly; that the wound of his finger was nearly healed, and the axillary tumor almoſt gone. The pain had ceaſed. He was deſired to continue the remedies, and his health was ſoon reſtored.

Sometime after our firſt conſultation on the caſe, my patient acquainted me, that a woman, whom he had lately delivered, had applied to him to cure her of ſome venereal ulcers. He entertained not a doubt that he received the venereal infection from theſe ulcers.

The Third Case.

On the 10th of May, 1794, I was conſulted by another Accoucheur. I have noted, that a wound of a finger of his left hand had received a venereal infection three weeks ago. He complained of laſſitude, proſtration of ſtrength, giddineſs, and ſenſibility to cold. For a fortnight, he had perceived a tumor in a lymphatic gland above the elbow, and in another near the elbow. I adviſed Ung. Hydr. ʒ ſs every night, with decoct. ſarſap.

April 8th, he had uſed eight ſcruples of mercurial ointment.

His

His health had improved. The lymphatic glands, lately ſwelled and painful, were relieved.

April 19th, he had uſed an ounce of the mercurial ointment. He was recovering; but the ulcer of his finger ſtill remained red and ſwelled. He was deſired to continue the remedies.

Thus, in three ſucceſſive caſes, the venereal poiſon applied to a finger, produced ſordid, ſpongy, painful, phagedenic ulcers; inflamed lymphatic abſorbents and glands; and manifeſt ſymptoms of a low nervous fever.

Accoucheurs ought to be fully aware of the danger to which their health and life are ſo much expoſed. I have very ſeldom witneſſed an inſtance where the life of a patient was reſcued from more imminent danger than in the firſt caſe above related. Since theſe events have occurred to my obſervation, a painful doubt has frequently ariſen in my mind, whether the death of my much-lamented friend, HEWSON, might not be aſcribed to ſuch a fatal miſtake.

I requeſt the favour of you, Gentlemen, to inſert theſe facts in your uſeful Miſcellany; and wiſh to invite ſome of your numerous and reſpectable readers and correſpondents to relate, in your Journal, ſimilar caſes which may have fallen under their obſervation, ſo as to form ſome general eſtimate, whether ſuch a fever frequently, or but ſeldom, accompanies the introduction of this poiſon into the ſyſtem, when applied to a finger, lip, &c.* It may be preſumed, that fever is not the uſual conſequence of this mode of receiving the venereal infection; otherwiſe, it muſt have been more generally known among medical men. At any rate, the preceding caſes will give an uſeful warning to Surgeons and Accoucheurs; they will, on a like occaſion, be aware of the danger, and be prepared with the proper remedy. If theſe hints preſerve my profeſſional brethren from miſtakes which might prove fatal to themſelves, I ſhall be gratified with the moſt cordial ſatisfaction; and am,

GENTLEMEN,

Your faithful ſervant,

Bath, Feb. 7th, 1800. J. HAYGARTH.

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* On the 16th of October, 1769, I attended a young lady, whoſe caſe I have noted: "For five weeks ſhe has had a callous ulcer on her upper lip, probably venereal, with red and rough eruptions on her face and body. Pulſe 100; chilly on expoſure to cold. She feels a ſenſe of fatigue, but yet can walk and ride."

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN your useful Journal so much has been said (and mostly very properly said) relative to the *Digitalis*, that every liberal mind must feel a satisfaction in perusing those friendly efforts to ascertain the real powers and utility of a medicine, thought by many to be of eminent service in what has been deemed, in some stages, an incurable disorder, the *pulmonary consumption*. I must confess, the few trials I have made with the *Digitalis* incline me in its favour, and therefore, in your last Number, I was pleased with Dr. Kinglake's practice, in altering the common method in which patients usually took their diet. The Doctor's method of recommending their receiving nutriment more frequent, and less in quantity, rationally appears to tend more to facilitate and less to clog the wheels of life; and every effort that will promote strength in this disorder is of much importance, and may greatly assist the operation of the *Digitalis*. I am now trying some experiments to ascertain the qualities of this useful plant, and, should they prove testimonies in its favour, a particular account of them shall be transmitted to you. In the mean time, I wish to notice the use of the *Digitalis* in some cases of the *dropsy*, as mentioned by the late Dr. Darwin, and quoted by Dr. Ferriar in his recent publication on the *Digitalis*. But Dr. Ferriar having omitted to give in his work the extracts from the publication of his ingenious predecessor, and believing the treatise itself in but few hands, I am happy in presenting them to your service; and am,

GENTLEMEN,

With respect,

Your very humble servant,

Piccadilly, Feb. 10, 1800. THO. HARRINGTON.

It appears, that about the time (1778) when Mr. Darwin made the following extracts, the fox-glove was much in practice in Leicestershire, and given with considerable success in the dropsy. The annexed cases are, therefore, related with design to ascertain the particular kind of dropsy in which this plant appears preferable to other evacuents.

Anasarca of the Lungs.

1. A Lady, between forty and fifty years of age, had been indisposed some time, was then seized with cough and fever, and

and afterwards expectorated much digested mucus. This expectoration suddenly ceased, and a considerable difficulty of breathing supervened, with a pulse very irregular both in velocity and strength; she was much distressed at first lying down, and at first rising; but after a minute or two, bore either of those attitudes with ease. She had no pain or numbness in her arms; she had no hectic fever, nor any cold shiverings; and the urine was in due quantity, and of the natural colour. The difficulty of breathing was twice considerably relieved by small doses of ipecacuhana, which operated upwards and downwards, but recurred in a few days; she was then directed a decoction of fox-glove (digitalis purpurea), prepared by boiling four ounces of the fresh leaves from two pints of water to one pint; to which were added two ounces of vinous spirit; she took three large spoonfulls of this mixture every two hours, till she had taken it four times; a continued sickness supervened, with frequent vomiting, and a copious flow of urine; these evacuations continued at intervals for two or three days, and relieved the difficulty of breathing. She had some relapses afterwards, which were again relieved by the repetition of the decoction of fox-glove.

2. A Gentleman, about sixty years of age, who had been addicted to an immoderate use of fermented liquors, and had been very corpulent, gradually lost his strength and flesh; had great difficulty of breathing, with legs somewhat swelled, and a very irregular pulse. He was very much distressed at first lying down, and at first rising from his bed, yet in a minute or two was easy in both those attitudes. He made straw coloured urine in due quantity, and had no pain or numbness of his arms. He took a large spoonful of the decoction of fox-glove, as above, every hour, for ten or twelve successive hours; had incessant sickness for about two days, and passed a large quantity of urine; upon which his breath became quite easy, and the swelling of his legs subsided; but, as his whole constitution was already sinking from the previous intemperance of his life, he did not survive more than three or four months.

Hydrops Pericardii.

3. A Gentleman, of temperate life and sedulous application to business, between thirty and forty years of age, had long been subject, at intervals, to an irregular pulse; a few months ago he became weak, with difficulty of breathing, and dry cough. In this situation, a physician of eminence directed him to abstain from all animal food and fermented liquor; during which regimen all his complaints increased. He now became emaciated, and totally lost his appetite; his pulse very irregular both in velocity and strength, with great difficulty in breathing, and some

ſwelling of his legs; yet he could lie down horizontally in his bed, though he got little ſleep, and paſſed a due quantity of urine, and of the natural colour; no fullneſs or hardneſs could be perceived about the region of the liver; and he had no pain or numbneſs in his arm. One night he had a moſt profuſe ſweat all over his body and limbs, which quite deluged his bed, and for a day or two ſomewhat relieved his difficulty of breathing, and his pulſe became leſs irregular; this copious ſweat recurred three or four times, at the intervals of five or ſix days, and repeatedly alleviated his ſymptons. He was directed one large ſpoonful of the above decoction of fox-glove every hour, till it procured ſome conſiderable evacuation; after he had taken it eleven ſucceſſive hours he had a few liquid ſtools, attended with a great flow of urine, which laſt had a dark tinge, as if mixed with a few drops of blood; he continued ſick at intervals, for two days, but his breath became quite eaſy, and his pulſe quite regular; the ſwelling of his legs diſappeared, and his appetite and ſleep returned. He then took three grains of white vitriol twice a day, with ſome bitter medicines, and a grain of opium, with five grains of rhubarb, every night; was adviſed to eat fleſh meat, and ſpice, as his ſtomach would bear it, with ſmall beer, and a few glaſſes of wine; and had iſſues made in his thighs. He has ſuffered no relapſe.

4. A Lady, about fifty years of age, had, for ſome weeks, great difficulty of breathing, with very irregular pulſe, and conſiderable general debility; ſhe could lie down in bed, and the urine was in due quantity, and of the natural colour, and ſhe had no pain or numbneſs in her arms. She took one large ſpoonful of the above decoction of fox-glove every hour, for ten or twelve ſucceſſive hours; was ſick, and made a quantity of pale urine for about two days, and was quite relieved of the difficulty of breathing, and the irregularity of her pulſe. She then took a grain of opium, and five grains of rhubarb every night, for many weeks, with ſome ſlight chalybeate and bitter medicines; and has ſuffered no relapſe.

Hydrops Thoracis.

5. A Tradeſman, about fifty years of age, became weak and ſhort of breath, eſpecially on increaſe of motion, with pain in one arm, about the inſertion of the biceps muſcle. He obſerved he ſometimes in the night made an unuſual quantity of pale water. He took calomel, alum, and Peruvian bark, and all his ſymptoms increaſed; his legs began to ſwell conſiderably; his breath became more difficult, and he could not lie down in bed; but all this time he made a due quantity of ſtraw coloured water. The decoction of fox-glove was given, as in the preceding

ceding caſes, which operated chiefly by purging, and ſeemed to relieve his breath for a day or two; but alſo ſeemed to contribute to weaken him. He became, after ſome weeks, univerſally dropſical, and died comatoſe.

6. A young Lady, of delicate conſtitution, with light eyes and hair, and who had, perhaps, lived too abſtemiouſly, both in reſpect to the quantity and quality of what ſhe ate and drank, was ſeized with great difficulty of breathing, ſo as to threaten immediate death. Her extremities were quite cold, and her breath felt cold to the back of one's hand. She had no ſweats, nor could ſhe lie down for a ſingle moment; and had previouſly, and at preſent, complained of great weakneſs and pain, and numbneſs of both her arms; had no ſwelling of her legs, nor thirſt; water in due quantity and colour. Her ſiſter, about a year before, was afflicted with ſimilar ſymptoms, was repeatedly blooded, and died univerſally dropſical. A grain of opium was given immediately, and repeated every ſix hours, with evident and amazing advantage; afterwards a bliſter, with chalybeates, bitters, and eſſential oils, were exhibited; but nothing had ſuch eminent effect in relieving the difficulty of breathing, and coldneſs of her extremities, as opium, by the uſe of which, in a few weeks, ſhe perfectly regained her health, and has, for more than two years, ſuffered no relapſe.

Aſcites.

7. A young Lady, of delicate conſtitution, having been expoſed to great fear, cold, and fatigue, by the overturning of a chaiſe in the night, began with pain and tumour in the right hypochondrium; in a few months a fluctuation was felt throughout the whole abdomen; more diſtinctly perceptible, indeed, about the region of the ſtomach, ſince the integuments of the lower part of the abdomen generally become thickened in this diſeaſe by a degree of anaſarca. Her legs were not ſwelled; no thirſt; water in due quantity and colour. She took the foxglove ſo as to induce ſickneſs and ſtools, but without abating the ſwelling, and was obliged at length to ſubmit to the operation of tapping.

8. A Man, about ſixty-ſeven, who had long been accuſtomed to ſpirituous potations, had ſome time laboured under aſcites; his legs ſomewhat ſwelled; his breath eaſy in all attitudes; no appetite; great thirſt; urine in exceedingly ſmall quantity, very deep coloured and turbid; pulſe quick. He took the foxglove in ſuch quantity as vomited him, and induced ſickneſs for two days; but procured no flow of urine, or diminution of his ſwelling; but was thought to leave him conſiderably weaker.

9. A

9. A corpulent Man, accuſtomed to large potations of fermented liquors, had vehement cough, difficult breathing, anaſarca of his legs, thighs, and hands, and conſiderable tumour, with evident fluctuation of his abdomen; his pulſe was equal, his urine in ſmall quantity, of deep colour, and turbid. Theſe ſwellings had been twice conſiderably abated by draſtics cathartics. He took three ounces of a decoction of fox-glove, made by boiling one ounce of the freſh leaves in a pint of water, every three hours, for two whole days; it then began to vomit and purge him violently, and promoted a great flow of urine; he was, by theſe evacuations, completely emptied in twelve hours. After two or three months all theſe ſymptoms returned, and were again relieved by the uſe of the fox-glove; and thus, in the ſpace of three years, he was about ten times evacuated, and continued all that time his uſual potations; excepting at firſt the medicine operated only by urine, and did not appear conſiderably to weaken him. The laſt time he took it, it had no effect; and a few weeks afterwards he vomited a great quantity of blood, and expired.

QUERE. "Might not the fox-glove be ſerviceable in hydrocephalus internus, in hydrocele, and in white ſwellings of the joints?"——It certainly requires judgment and great caution in its uſe. Some authenticated inſtances of its fatal effects will be ſhortly ſent to the Editors.

To the Editors of the Medical and Phyſical Journal.

GENTLEMEN,

I AM glad to obſerve in the Medical and Phyſical Journal, No. XII. p. 191, that a ſubject ſo highly intereſting to every individual as that of burns and ſcalds, continues to draw its due ſhare of attention from the medical world. Mr. Kentiſh,* of Newcaſtle, was, I believe, the firſt who had the merit of bringing the ſubject into notice. As his method of treatment is exactly the reverſe of that of Mr. Earle, I hope you will permit me to occupy a ſmall portion of your valuable work in attempting to explain my reaſons for preferring the practice of the former gentleman to that of the latter.

In very extenſive burns, where nearly the whole ſurface of the body is affected, the patient is always ſeized, ſoon after the accident,

* See an Eſſay on Burns, &c. by Edward Kentiſh, Surgeon. London, Robinſons, 1797.

accident, with violent ſhivering, and at the ſame time complains of moſt excruciating burning pain. During this ſtage the pulſe is ſo ſmall as to be ſcarcely perceptible; and, in many caſes, that I have ſeen, it could not be felt at the wriſt. Would it be prudent, whilſt this paroxyſm continues, to plunge the patient into a cold bath, or to apply ice to the whole ſurface of the body? It may be ſaid, that this torpor continues only for a ſhort period.—In reply I muſt obſerve, that I have ſeen a patient with this cold ſit upon him for upwards of three hours, and have found it neceſſary to cover him up as warm as poſſible, to give him mulled wine, and to put bottles filled with warm water to his feet.

The ſuperiority of the ſtimulating practice is manifeſted in this,—that when the eſſential oil of turpentine is applied to a ſcalded or burned part, relief is, in moſt caſes that I have ſeen, produced within half an hour, provided that the remedy is made uſe of as ſoon after the accident as poſſible; nor have I obſerved any caſe, under the above circumſtances where the pain was protracted more than two hours.

In ſeveral ſlight caſes, where I have ſeen cold water made uſe of, it always required ſix, and not unfrequently eight, hours to free the ſufferer from agony; for the moment the application of cold water ceaſed, the pain returned with much greater vehemence. I recollect a caſe, which an eminent ſurgeon in Newcaſtle, Mr. Anderſon, communicated to Mr. Kentiſh more than two years ago, and which is moſt decidedly in favour of what is here advanced. A lady had both her arms ſeverely ſcalded with boiling water, from above the elbows down to the fingers ends. The *ol. terebinth.* was applied to one arm ſoon after the accident, and the other plunged into cold water, which was removed as often as it became warm. That arm to which the *ol. terebinth.* was applied, became perfectly eaſy in about half an hour; the other continued to give pain when taken out of the water, even for an inſtant, for more than ſix hours; and, as far as I recollect, it required a much longer time for its cure than the other.

[*For want of room, we ſhall conclude this Letter in our next.*]

STATE OF DISEASES IN LONDON.

Account of Diſeaſes in an Eaſtern Diſtrict from the 20th of January to the 20th of February, 1800.

ACUTE DISEASES.	No. of Caſes.		No. of Caſes.
Typhus Mitior - -	4	Pleuriſy - - -	3
Peripneumonia Notha -	10	Catarrh - - -	5
		Acute Rheumatiſm -	3

CHRONIC

	No. of Caſes.
CHRONIC DISEASES.	
Cough	19
Dyſpnœa	10
Cough with Dyſpnœa	23
Paraphonia	2
Phthiſis Pulmonalis	4
Hæmoptoe	3
Pleurodyne	2
Hydrothorax	4
Palpitatio	3
Gaſtrodynia	3
Nauſea	2
Vomitus	3
Dyſpepſia	6
Hypochondriaſis	3
Diarrhœa	6
Enterodynia	4
Hæmorrhois	3
Hepatitis Chronica	1
Enureſis	1
Menorrhagia	4
Amenorrhœa	5
Fluor Albus	4
Aſcites	3
Anaſarca	4
Hemiplegia	2
Epilepſy	1
Hyſteria	4
Scrophula	3
Chronic Rheumatiſm	20
PUERPERAL DISEASES	
Low Fever	3
Menorrhagia lochialis	5
Maſtrodynia	7
INFANTILE DISEASES.	
Hooping Cough	3
Ophthalmia	2
Convulſio	1
Dentition	3
Diarrhœa	4

The great ſeverity of the cold, and the long continuance of the eaſt and north-eaſterly winds, have occaſioned the continuance or return of pneumonic complaints.

The number of coughs and colds has been increaſed, and the ſymptoms in many caſes have been aggravated by the ſtate of the weather. The number of contagious diſeaſes has, however, been diminiſhed. The caſes of chronic rheumatiſm have increaſed in number, as appears by the liſt; and many of theſe have proved very obſtinate.

Diſeaſes admitted under the Care of the Phyſicians of the Weſtminſter Hoſpital, from the 18th of Jan. to the 20th of Feb. 1800.

Fevers	14	Epilepſy	1
Pleuriſy	8	Gaſtrodynia	2
Hepatitis	1	Hæmoptoe	2
Sore Throat	2	Hooping Cough	1
Amenorrhœa	4	Hypochondriaſis	1
Anaſarca	4	Hyſteria	2
Aſcites	3	Leucorrhœa	2
Aſthma	2	Lithiaſis	1
Catarrh	2	Phthiſis	5
Cough	17	Pleurodynia	1
Diarrhœa	9	Rheumatiſm	8
Dyſentery	2	Vertigo	1
Dyſpepſia	2	Vomiting	1
Dyſpnœa	2	Worms	2
Dyſuria	1		

Account

Account of a Man who lives upon large Quantities of raw Fleſh, in a letter from Dr. JOHNSTON, Commiſſioner of Sick and Wounded Seamen, to Dr. BLANE.

MY DEAR SIR, *Somerſet Place, Oct.* 28, 1799.

HAVING in Auguſt and September laſt been engaged in a tour of public duty, for the purpoſe of ſelecting from among the priſoners of war ſuch men as, from their infirmities, were fit objects for being releaſed without equivalent, I heard, upon my arrival at Liverpool, an account of one of theſe priſoners being endowed with an appetite and digeſtion ſo far beyond any thing that had ever occurred to me, either in my obſervation, reading, or by report, that I was deſirous of aſcertaining the particulars of it by occular proof, or undeniable teſtimony. Dr. Cochrane, Fellow of the College of Phyſicians of Edinburgh, and our medical agent at Liverpool, is fortunately a gentleman upon whoſe fidelity and accuracy I could perfectly depend; and I requeſted him to inſtitute an inquiry upon this ſubject, during my ſtay at that place. I incloſe you an atteſted copy of the reſult of this; and as it may probably appear to you, as it does to me, a document containing facts extremely intereſting, both in a natural and medical view, I will beg you to procure its inſertion in ſome reſpectable periodical work.

Some farther points of enquiry reſpecting this extraordinary perſon having occurred to me ſince my arrival in town, I ſent them in the form of queries to Doctor Cochrane, who has obligingly returned ſatisfactory anſwers. Theſe I ſend along with the above-mentioned atteſted ſtatement, to which I beg you to ſubjoin, ſuch reflections as may occur to you on this ſubject. I am,

MY DEAR SIR,

Your moſt obedient humble ſervant,

J. JOHNSTON.

To GILBERT BLANE, M. D. F. R. S. and one of the Commiſſioners of Sick and Wounded Seamen.

Charles Domery, a native of Benche, on the frontiers of Poland, aged 21, was brought to the priſon of Liverpool, in February 1799, having been a ſoldier in the French ſervice on board the Hoche, captured by the ſquadron under the command of Sir John B. Warren off Ireland.

He is one of nine brothers, who, with their father, have been remarkable for the voracioufneſs of their appetites. They were all placed early in the army; and the peculiar craving for food with this young man began at 13 years of age.

He was allowed two rations in the army, and by his earnings, or the indulgence of his comrades, procured an additional ſupply.

When in the camp, if bread or meat were ſcarce, he made up the deficiency by eating four or five pounds of graſs daily; and in one year, declares he devoured 174 cats, (not their skins) dead or alive; and ſays, he had ſeveral ſevere conflicts in the act of deſtroying them, by feeling the effects of their torments on his face and hands; ſometimes he killed them before eating, but when very hungry, did not wait to perform this humane office.

Dogs and rats equally ſuffered from his mercileſs jaws; and if much pinched by famine, the entrails of animals, indiſcriminately, became his prey. The above facts are atteſted by Picard, a reſpectable man, who was his comrade in the ſame regiment, on board the Hoche, and is now preſent; and who aſſures me, he has often ſeen him feed on thoſe animals.

When the ſhip, on board of which he was, had ſurrendered after an obſtinate action, finding himſelf, as uſual, hungry, and nothing elſe in his way but a man's leg, which was ſhot off, lying before him, he attacked it greedily, and was feeding heartily, when a ſailor ſnatched it from him, and threw it overboard.

Since he came to this priſon, he has eat one dead cat and about twenty rats. But what he delights moſt in, is raw meat, beef or mutton, of which, though plentifully ſupplied by eating the rations of ten men daily,* he complains he has not the ſame quantity, nor indulged in eating ſo much as he uſed to do, when in France.

He often devours a bullock's liver, raw, three pounds of candles and a few pounds of raw beef, in one day, without taſting bread or vegetables, waſhing it down with water, if his allowance of beer is expended.

His ſubſiſtence at preſent, independent of his own rations, ariſes from the generoſity of the priſoners, who give him a ſhare of their allowance. Nor is his ſtomach confined to meat, for when in the hoſpital, where ſome of the patients refuſing to take

* The French priſoners of war are at this time maintained at the expence of their own nation, and each are allowed the following daily ration: twenty-ſix ounces of bread, half a pound of beef, half a pound of greens, two ounces of butter, or ſix ounces of cheeſe.

take their medicines, Domery had no objection to perform this for them; and his ſtomach never rejected any thing, as he never vomits, whatever be the contents, or however large.

Wiſhing fairly to try how much he actually could eat in one day, on the 7th of September, 1799, at four o'clock in the morning he breakfaſted on four pounds of raw cow's udder; at half paſt nine, in preſence of Dr. Johnſton, commiſſioner of ſick and wounded ſeamen, Admiral Child and his ſons, Mr. Foſter, agent for priſoners, and ſeveral reſpectable gentlemen, he exhibited his powers as follows: There was ſet before him five pounds of raw beef, and twelve tallow candles of a pound weight, and one bottle of porter; theſe he finiſhed by half paſt ten o'clock. At one o'clock, there was again put before him, five pounds of beef, and one pound of candles, with three bottles of porter; at which time he was locked up in the room, and ſentries placed at the windows to prevent his throwing away any of his proviſions. At two o'clock, when I again ſaw him with two friends, he had nearly finiſhed the whole of the candles, and great part of the beef, but had neither evacuation by vomiting, ſtool, or urine; his skin was cool, and pulſe regular, and in good ſpirits. At a quarter paſt ſix, when he was to be returned to his priſon, he had devoured the whole, and declared he could have eat more; but from the priſoners without, telling him, we wiſhed to make ſome experiment on him, he began to be alarmed. It is alſo to be obſerved, that the day was hot, and not having his uſual excerciſe in the yard, it may be preſumed, he would otherwiſe had a better appetite. On recapitulating the whole conſumption of this day, it ſtands thus:

Raw cow's udder	—	4lb.
Raw beef	—	10
Candles	—	2
Total	-	16lb. beſide five bottles of porter.

The eagerneſs with which he attacks his beef when his ſtomach is not gorged, reſembles the voracity of a hungry wolf, tearing off large morſels with his teeth, rolling them about in his mouth, and ſwallowing them with canine greedineſs. When his throat is dry from continued exerciſe, he lubricates it by ſtripping the greaſe off the candle between his teeth, which he generally finiſhes at three mouthfuls, and wrapping the wick like a ball, ſtring and all, ſends it after at a ſwallow. He can, when no choice is left, make ſhift to dine on immenſe quantities of raw potatoes, or turnips; but from choice, would never deſire to taſte bread or vegetables.

He is in every respect healthy, his tongue clean, and his eyes lively.

After he went to the prison, he danced, smoaked his pipe, and drank a bottle of porter; and by four next morning, he awoke with his usual ravenous appetite, which he quieted by a few pounds of raw beef.

He is six feet three inches high, pale complexion, grey eyes, long brown hair, well made but thin, his countenance rather pleasant, and is good tempered.

The above is written from his own mouth, in the presence of, and attested by.

DESTAUBAN, French Surgeon.
LE FOURNIER, Steward of the Hospital.
REVET, Commissaire de la Prison.
LE FLEM, Garde du Magazin de l'Hospital.
Picard, Soldat de la 1er Demi Brigade.

THOMAS COCHRANE, M. D. Inspector and Surgeon of the Prisons, and Agent, &c. for sick and wounded Seamen.

Liverpool, Sept 9, 1799.

A true Copy,

JOHN BYNON, Clerk in the Office for sick and wounded Seamen.

QUERIES and ANSWERS.

1. What is the quantity and quality of his fæces?

He goes to stool commonly morning and afternoon, in a smaller or larger quantity, according to the victuals he eats; but the fæces are by no means proportioned to the *ingesta*, and, indeed, seldom exceeding those of other men. They are always the same consistence, generally hard, but of no extraordinary colour: and this last is the same, whether he eats vegetables or not with his animal food. They are not particularly offensive.

2 What are the circumstances of his sleep and perspiration?

He gets to bed about eight o'clock at night, immediately after which he begins to sweat, and that so profusely, as to be obliged to throw off his shirt. He feels extremely hot, and in an hour or two after goes to sleep, which lasts until one in the morning, after which he always feels himself hungry, even though he had lain down with a full stomach. He then eats bread or beef, or whatever provision he may have reserved through the day; and if he has none, he beguiles the time in smoaking tobacco. About two o'clock he goes to sleep again, and awakes at five or six o'clock in the morning in a violent perspiration, with great heat. This quits him on getting up; and when he has laid in a fresh cargo of raw meat, (to use his own expression,) he feels his body in a good state. The perspiration, whether sensible or insensible, has no remarkable smell; indeed, much less than that of many persons who live on a very different

different regimen. He ſweats while he is eating; and it is probably owing to this conſtant propenſity to exalation from the ſurface of the body, that his skin is commonly found to be cool, as is ſtated in the narrative.

3. What is his heat by the thermometer?

I have often tried it, and found it to be of the ſtandard temperature of the human body. His pulſe is now eighty-four, full and regular.

4. Can this ravenous appetite be traced higher than his father?

He knows nothing of his anceſtors beyond his father. When he left the country, eleven years ago, his father was alive, aged about fifty, a tall, ſtout man, always healthy; and he can remember he was a great eater, but was too young to recollect the quantity, but that he eat his meat half boiled. He does not recollect that either himſelf or his brothers had any ailment, excepting the ſmall-pox, which ended favourably with them all. He was then an infant; his face is perfectly ſmooth.

5. Does he make much urine?

With his ordinary allowance of drink not more than a quart in the day. He ſays the ſmell is not more offenſive than that of other men. On board of the tranſport coming from Ireland, he ſays, he drank his own urine as often as he voided it, for want of drink, and that he never vomited it.

6. Is his muſcular ſtrength greater or leſs than that of other men of his time of life?

Though his muſcles are pretty firm, I do not think they are ſo full or plump as thoſe of moſt other men. He has, however, by his own declaration, carried a load of three hundred weight of flour in France, and marched fourteen leagues in a day.

7. Is he dull or intelligent?

He can neither read nor write, but is very intelligent and converſable, and can give a diſtinct and conſiſtent anſwer to any queſtion put to him. I have put a variety at different times, and in different ſhapes, tending to throw all the light poſſible on his hiſtory, and never found that he varied, ſo that I am inclined to believe that he adheres to truth.

8. Under what circumſtances did this voracious diſpoſition firſt come on?

It came on at the age of thirteen, as has been already ſtated. He was then in the ſervice of Pruſſia, at the ſiege of Thionville; they were at that time much ſtraitened for proviſion, and as he found this did not ſuit him, he deſerted into the town. He was conducted to the French General, who preſented him with a large melon, which he devoured, rind and all, and then an immenſe quantity and variety of other ſpecies of food, to the great entertainment of that officer and his ſuite. From that time

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he has preferred raw to dreſſed meat; and when he eats a moderate quantity of what has been either roaſted or boiled, he throws it up immediately. What is ſtated above, therefore, reſpecting his never vomiting, is not to be underſtood literally, but imports merely that thoſe things which are more nauſeous to others, had no effect upon his ſtomach.

9. Is there any thing remarkable regarding his venereal appetite or powers?

Upon inquiry I do not find there is any thing remarkable in this man, in theſe reſpects.

There is nothing farther to remark, but that ſince the atteſted narrative was drawn up, he has repeatedly indulged himſelf in the cruel repaſt there deſcribed, devouring the whole animal, except the skin, bones, and bowels; but this has been put a ſtop to, on account of the ſcandal which it juſtly excited.

In conſidering this caſe, it ſeems to afford ſome matters for reflection, which are not only objects of conſiderable novelty and curioſity, but intereſting and important, by throwing light on the proceſs by which the food is diſgeſted and diſpoſed of.

Monſtroſity and diſeaſe, whether in the ſtructure of parts, or in the functions and appetites, illuſtrate particular points of the animal œconomy, by exhibiting them in certain relations in which they are not met with in the common courſe of nature. The power of the ſtomach in ſo quickly diſſolving, aſſimilating, and diſpoſing of the aliment in ordinary caſes, muſt ſtrike every reflecting perſon with wonder; but the hiſtory of this caſe affords a more palpable proof, and more clear conception of theſe proceſſes, juſt as objects of ſight become more ſenſible and ſtriking, when viewed by a magnifying glaſs, or when exhibited on a larger ſcale.

The facts here ſet forth, tend alſo to place in a ſtrong light, the great importance of the diſcharge by the skin, and to prove that it is by this outlet, more than by the bowels, that the recrementitious parts of the aliment are evacuated; that there is an admirable co-operation eſtabliſhed between the skin and the ſtomach, by means of that conſent of parts ſo obſervable, and ſo neceſſary in the other functions of the animal œconomy and, that the purpoſe of aliment is not merely to adminiſter to the growth and repair of the body, but by its bulk and peculiar ſtimulus to maintain the play of the organs eſſential to life.

On Chlorotic Affections; communicated by Dr. Scott.

[Continued from our laſt Number, p. 108.]

"IN this reſpect, ſhe feels entirely dependent upon others; and that in a great degree it does not reſt with herſelf, whether ſhe is even to taſte the ſweets of matrimony, or to lead an inſulated life; without a tender friend to be her confidant and ſupporter, and without the dear pledges of ſuch a friendſhip, to be the ſolace of her declining years. No wonder, therefore, that her full boſom ſhould ſwell ſo much with hopes and fears, occaſioning that languid and deſponding ſtate of mind, in which the ſympathizing body ſoon participates.

"Young men, of about the ſame age, who have been prevented by circumſtances from aſſociating ſo freely with their equals in years as they ſhould do, who have been kept under an improper conſtraint, or who are as yet undetermined about, and are daily brooding over, what particular occupation of life they are to follow, eſpecially if they poſſeſs a warm fancy and keen feelings, are ſometimes affected with what we may juſtly call *chloroſis*; they become wan and emaciated, deſpondent and indolent: averſe from both bodily and mental exertion, and wanting reſolution to encounter the ſtorms of active life, they court ſolitude, and indulge in the reveries of their own imagination. Moſt commonly ſhame, and a returning ſenſe of the propriety and neceſſity of their taking a part in the multifarious duties of the buſy world, and the ſolicitation of friends, put a ſtop to this affection, by calling off the mind from its own feelings. Although, I believe, that this ſtate ſometimes goes on increaſing, or continues ſo long as to lay the foundation for, or to bring into action, a prediſpoſition to other more dangerous and fatal diſeaſes, as conſumption of the lungs, &c. we have well authenticated inſtances on record, of men having even fallen a ſacrifice to miſtaken notions of religion, in denying themſelves the enjoyment of the ſex. One poet, Michael Verini, of Florence, has very feelingly deſcribed (ſee Roſcoe's Life of Lorenzo de Medici, Vol. II. Appendix) his own ſenſations in this ſituation, and ſeems to have been perfectly aware of the fate he had to expect, by perſiſting in this rigid continence.

"If our hypotheſis be well founded, we ſhould very ſeldom meet with the diſeaſe in the lower claſs of females, or at leaſt much leſs frequently than in the middling and higher claſſes, as their condition puts them in ſome meaſure on the ſame footing with the male; the cares of life, and the procuring the means

means of subsistence, engrossing most commonly their whole attention; while they neither are under the same restraints, nor have received the same ideas of female honour, as those above them. The disease, too, should be almost unknown in savage life; and its occurrence should be connected with the progression of society, and of refinement of manners. It would therefore be necessary to inquire, whether it occurs oftener in some countries than in others? whether it was equally common in ancient as in modern times? whether the peculiar customs of different countries, or particular modes of education, affect its frequency? and whether it is as often met with in the recluse and country, as in the bustling and city life? It would be likewise requisite to compare its symptoms, &c. with those of diseases, which, according to observation, derive their origin from, or are somehow connected with particular passions and emotions of mind. We should inquire, too, whether (as is supposed in what would be then its congener, *nostalgia*) a peculiarity in the scenery and general habitude of the place of nativity or residence, influenced its occurrence, by working on the imagination, and giving a term to the fancy and general association of ideas?

"I am well aware that this hypothesis will be found open to many objections, and that it is far from giving us a satisfactory explanation of the disease. I only suggest the necessity of attending to the subject, as from it there may, perhaps, arise, to a philosophical inquirer, the means of averting, in some measure, a malady which so often preys upon blooming beauty, by a proper direction of the passions during education, and in early life; by calling off the mind, at this important crisis, from its own anxious and painful surmises, and by engaging the attention in some active occupation. I would, however, beg leave to remark, that, in the discussion of this question, extreme delicacy and caution should be observed, lest the deceitful sophister should therein find a pretence to impose on us his iniquitous pretended improvements; or the artful libertine, a lure to ensnare the unsuspicious and unguarded female in the mazes of vice."

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IF the following trifles are conſiſtent with the plan of your work, they are at your ſervice.

Fort George, Jan. 14, 1800. VIATOR.

Among thoſe remedies of which modern experience has either diſcovered or extended the uſe, wine ſtands pre-eminently conſpicuous. None is oftener, or more efficaciouſly employed; it is a grateful and ſalutary cordial for every ſpecies of debility, and oppoſes the ravages of fever with unequalled power; but great as its virtues are, we are too often obliged to forego them, from the inability of the patient to provide himſelf with ſo expenſive an article. A thing the more to be regretted, ſince the caſes requiring the uſe of wine are innumerable, and the effects which a phyſician has it in his power to produce by it, altogether aſtoniſhing; as typhus, the bane of all manufacturing and populous towns, is often not at all, and never quickly, to be removed but by this remedy.* Diluted ſpirits have been ſubſtituted, as many ſay, with ſucceſs; and Cullen, if I be not miſtaken, thought at one time, that punch and opium were not inferior to wine. I find, however, that in Edinburgh, (I do not know whether in other medical ſchools alſo) this opinion has fallen, like many of its predeceſſors, into neglect, ſome experiments made in the infirmary there having proved hoſtile to it. A few trials, however, cannot be allowed to decide this point, which the price of wine has made of conſequence; and I am indeed deceived, if I have not often ſeen excellent effects from the adminiſtration of alcohol. Much reaſoning has been uſed to explain the imagined difference of operation between theſe two remedies. The tartareous acid and aſtringent matter have each their advocates, and there has been hitherto a ſort of myſtery about this affair. Tartareous acid will not cure fever, neither will aſtringents, nor the extractive matter, nor alcohol, nor water; not even a mixture of all theſe is ſaid to ſucceed. But wine does; and yet wine is nothing but a mixture of the ingredients juſt enumerated. This

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* I do not here advert to the yet unconfirmed uſe of the affuſion of cold water, propoſed in a moſt ingenious work by Dr. Currie. If a nameleſs man may ſpeak of his own very limited experience, he would ſuggeſt the inquiry, whether the affuſion, if unſucceſsful, be not very apt to produce obſtinate diarrhœa.

ſeems intelligible only in one of two ways: Either there is ſome chemical difference between the alcohol in wine, and the pure, or only contaminated with water and empyreumatic oil; for acids, we know, operate a change on the component parts of alcohol; and thus alſo, the ardent ſpirit exiſting in wine, may differ from that diſtilled in ſome proportion of hydrogen, or carbon, or otherwiſe, but be converted by the heat into common alcohol; or, if this be not the caſe, the difference muſt ariſe from the mode of union of the ingredients. In wine, there is a perfect combination of materials; in diluted alcohol or punch, perhaps little more than an appoſition, at leaſt an union in ſome reſpect leſs perfect. Whoever has mixed alcohol and water, muſt have obſerved the ſpirits like threads through the liquor, and this appearance ir is difficult to remove entirely, marking rather a diffuſion than an union. I know, myſelf, a gentleman who can readily diſtinguiſh two ſpirits of equal ſtrength, of which the one is pure from diſtillation, and the other prepared by the admixture of water with a ſpirit of ſuperior ſtrength. There muſt be, ſurely, ſome diſtinction, when the taſte can diſcriminate. Many other ſubſtances will not unite by ſimple appoſition, without heat or trituration, as ſulphuric acid and mercury, and multitudes of others; and it ſeems doubtful, whether in punch, as commonly made, there be any real union of the parts. But grant this, it may be ſaid, and what follows? Every body knows, that while a glaſs or two of wine ſtrengthens the body, a bottle or two weakens it; and that, in typhus, a large quantity through the day, in ſmall doſes, does much good, which quantity taken at once, does a great deal of harm. So wine, being a homogeneous fluid, excites a gradual and gentle action, while punch being a heterogeneous fluid, acts partly as water, and partly as alcohol; that is, one part is inert, and the other acts with the violence of ſpirits, and ſo tends to debilitate, as that ſubſtance always does. If this be true, by a more perfect combination of alcohol with water, a ſubſtance might be prodnced, at leaſt more approaching to the qualities of wine. Punch is now prepared by a haſty mixture of the ingredients, and is uſed as ſoon as made; but to exert its full effect, more care is neceſſary: hot water ſhould be uſed, and the liquor afterwards frequently agitated; and the longer it is kept, if ſecured from evaporation, ſo much the better. I ſhould ſuppoſe, that if a ſlight fermentation were induced, the mixture would receive material advantage. If this were true, it would be of immenſe advantage to the poor, who can often afford this, when wine is beyond their reach; and the large hoſpitals would ſave part of an enormous expence, now incurred for wine. I am the more inclined to think there is ſome

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foundation for this opinion; becauſe, the home-made wines are admitted to be uſeful in medicines, and are certainly only the ingredients of punch more completely combined.

To the Editors of the Medical and Phyſical Journal.

GENTLEMEN,

HAVING had an opportunity of examining the bodies of pigs, that have died of a diſeaſe which is very common to thoſe animals, and which frequently proves fatal; and as no one has hitherto given a clear deſcription of the morbid appearances of the body after death, or pointed out an effectual method of treating the diſeaſe, I thought the following obſervations might be uſeful to the public, becauſe I truſt they will ſuggeſt a mode of treatment that will be found generally ſucceſsful; and, conſequently, I preſumed there would be no impropriety in requeſting you to communicate them through the medium of your uſeful Journal.

The diſeaſe alluded to is, by ſome, called the Swine Pox; in ſome places it is called the heavings; in others the meaſles; in ſhort, it has a great variety of names. It is the moſt common diſeaſe among pigs, and appears to ariſe frequently from contagion. On the firſt attack, the animal appears to be ſick, and refuſes his food; he becomes heavy, and unwilling to move; and there is generally a weak cough, attended with a convulſive twitching of the abdominal muſcles, or flanks; there is generally a ſcaly kind of eruption on the body alſo. As the diſeaſe advances, the voice acquires a peculiar ſhrill tone, and becomes extremely weak; the pupils of the eyes are ſometimes dilated, and the retina appears to have loſt, in a great meaſure, its ſenſibility to light. Sometimes the animal appears to be delirious, running againſt the wall, or any thing that may be in its way. On examining the body after death, the ſtomach was found highly inflamed, and there were ſeveral perfectly black ſpots on its internal ſurface, The inteſtines were alſo highly inflamed on both ſurfaces, and in ſome parts had nearly approached to a gangrenous ſtate; the inflammation was more conſiderable in the ſmall than in the large inteſtines. The lungs were likewiſe inflamed, and adhered in ſeveral parts to the inſide of the ribs. The bronchiæ were loaded with inſpiſſated mucus, and the membrane which lines them was conſiderably inflamed. The liver was healthy, but the gall bladder appeared to be diſtended with bile, though no obſtruction could

be discovered in the duct. The kidneys, spleen, and bladder, were in a natural state, but the urethra was inflamed. The vessels of the brain were considerably distended, particularly on its surface; and the plexus choroides was much enlarged. There was no fluid in the ventricles.

From these appearances, it is very evident that the disease depends on general inflammation, and that the variation sometimes observed on the symptoms is occasioned by the inflammation being more considerable in one part than another. With regard to the remote causes of the disease, it is not improbable that the infectious matter is originally produced by keeping these animals in too close a place, and neglecting cleanliness; but in some instances the disease appears to have arisen spontaneously. The following is the mode of treatment I would recommend: As soon as the disease is observed, the animal is to be bled; this is commonly done by cutting off part of the ear or tail, by which a sufficient quantity of blood cannot be procured; but there are two arteries in the roof of the mouth, which may be easily opened with a gum lancet, or a common fleam. Should the bleeding continue longer than is necessary, it may be stopped by placing a pledget of tow on the orifice, and confining it by means of tape brought round the nose; but it is proper to draw a *considerable* quantity of blood in this disease. Two ounces of sallad oil are to be given, though Castor oil would, probably be more efficacious; and clysters of water gruel, with sweet oil, will be found very useful. If these remedies be applied at the commencement of the disease, I think they will be generally successful; and in many cases, it is probable, that a proper bleeding alone, at the first attack, will speedily remove the disease. But when it has been neglected, or improperly treated at first, the cure is by no means so certain, and it will be necessary to make an incision under each ear, and to fill the wound with tow, moistened with oil of turpentine. It will be found useful also to raise inflammation on the abdomen and chest, by means of blisters, or the actual cautery, if those parts are not covered with the eruption.

Therefore, it is of the greatest consequence to attack the disease at its first appearance, for in this will our success in a great measure depend.

I have the honour to be,
GENTLEMEN,
Your most obedient servant,
J. TWITCH.

Salisbury, Jan. 26, 1800.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

SHOULD you think the subsequent observations deserving a page in your Journal, you will oblige, by inserting them,

Your's, respectfully,

THOMAS PECK.

Higham Ferrers, Jan. 16, 1800.

On the Expediency of an early delivery of the Placenta.

The placenta having answered the intention it was formed for, is found no longer serviceable either to the œconomy of the mother or child. It is therefore, separated from the uterus, and expelled generally by the efforts of Nature, or with very little assistance. Unfortunately, however, it is sometimes retained in utero, from the following causes: the rupture of the funis, or the irregular contraction of the uterus. Either of these causes existing, it behoves the practitioner Immediately to determine his conduct: I say, immediately, because, in my opinion, the placenta cannot be too speedily removed after the expulsion of the child. I do not mean to urge the propriety of a *forcible* extraction of the placenta, the very moment the funis is divided, but to pay direct attention to the efforts of Nature; and, if such efforts are not sufficient to expel it in ten or fifteen minutes, to extract it; for, as Mr. Davies (in a former Journal*) very justly remarks, "hæmorrhage will not cease, while the substance of the placenta is distending the cavity of the uterus;—and, if it be not removed in that time, it is highly probable that the uterus will contract irregularly upon it, and occasion some difficulty in its extraction. I am persuaded, I have met with more than one instance in my own practice, where this has been the case, arising wholly from a delay in the extraction of the placenta. Mr. Davies seems aware, that manual efforts have been too forcibly and prematurely pursisted in; I suppose he means, where there may have been an adhesion of a part of the placenta. For my own part, I never would suffer the smallest portion of it to *remain* in the uterus, if *manual operation* would prevent it; and, I must beg leave to say, that I conceive, if Mr. Davies had persisted in his attempts *at first*, he would have succeeded;

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* Vide No. XI. page 7.

ceeded; but his patient became exhauſted. I would ask him the cauſe of ſuch exhauſtion. Certainly, not manual efforts, but the hæmorrhage; and the cauſe of the hæmorrhage, the retention of the placenta. It became the buſineſs, therefore, of the accoucheur, to remove the cauſe as ſpeedily as *poſſible*, and not to regard the exhauſtion of his patient *at all*, well knowing it to be *more* favourable to his attempts. Mr D. in this exhauſted ſtate of his patient, ſupported her with cordial, &c. which, in the opinion of moſt people, muſt tend to increaſe the ſymptoms under which his patient laboured; I mean, the hæmorrhage and its conſequences. Another objection to deſiſting in ſuch caſe is, the probability of ſtill greater difficulty, from the irregular contraction of the uterus. Mr. Davis will pardon the liberty I have taken in commenting on his caſe: I mean to preſs the neceſſity of an early removal of the placenta, from the uterus, as, having performed its proper office, and if ſuffered to be retained long, likely to produce ſymptons not *only* troubleſome but very dangerous to the patient.

Since I communicated a caſe of Steatoma being cured by ſeton,* I have met with another of ſmaller ſize, which ſucceeded equally well, by the ſame treatment.

To the Editors of the Medical and Phyſical Journal.

GENTLEMEN,

THE following caſe of Suſpended Animation occuring immediately after birth, from the great length of time which elapſed before there were any ſigns of vital action, ſtruck me as curious; and the fortunate iſſue of the attempts to reſtore it, under circumſtances which at firſt appeared hopeleſs, leads me to think that the relation of it may be uſeful.

If you are of opinion that it is ſufficiently intereſting or important to deſerve a place in your valuable publication, you will oblige me by inſerting it.

I am GENTLEMEN,

Your's &c.

ALLEN WILLIAMS.

St. Margaret's Hill, Southwark,
January 18, 1800.

Early

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* Vide Vol. I. page 422.

Early on Saturday morning, December 14, 1799, I was deſired to attend Mrs. J. W. of Borough High Street, Southwark, who, by the account of her huſband, was at that time delivered of a child, by the natural efforts of the mother. I aroſe, and went as expeditiouſly as poſſible. Upon my entering the chamber, the lady was in bed, conſiderably diſtreſſed in her mind, from a conviction that this her ſecond child was dead, which was the more unfortunate, as her firſt child had been ſtill-born. Previouſly to my arriving at the houſe, ſhe had been ſitting on a night chair, in which I obſerved a child perpendicularly placed; the head and the placenta immerſed in the liquor amnii in the inferior part of the pan, while the legs extended over its ſuperior edge. I immediately removed the child, apparently lifeleſs, from this ſituation, in which, from being ſurrounded by a watery medium, the reception of air into the lungs had been rendered impoſſible. Upon a careful examination, the actions of the heart and vaſcular ſyſtem ſeemed to have ceaſed, the face was diſtended with venous blood, and I feared that the death of an infant could not now be prevented, whoſe powers were ſufficient for her exiſtence previous to birth; and who, only from want of timely profeſſional aſſiſtance, had been drowned by that fluid, which before had been her protection. I was led to believe, that the apparent death of the child had been produced by the peculiar circumſtances of its birth only, by obſerving a want of a ſeparation of the cuticle, offenſive effluvia, and thoſe other appearances which indicate death, whilſt the child is in utero.

The beſt poſſible chance which preſented itſelf to my mind for the reanimation of the infant, was the immediate inflation of the lungs; I therefore haſtened home, procured a ſmall ſilver pipe, which, upon my return, I paſſed into the trachea, diſtended the lungs with air, and expelled it by a ſlight compreſſion of the cheſt and abdomen. I repeated this artificial reſpiration for five or ſix minutes, by which time the child had been born above thirty minutes. I then deſiſted, with a view of aſcertaining whether any vital powers were called forth; and the firſt circumſtance which I obſerved, was an extremely ſlight tremulous motion, exactly over the left external jugular vein, which I imagine was produced by its contents eſcaping into the left ſubclavian, and from thence into the ſuperior cava, from ſome action of the heart. Almoſt at that inſtant, the child took, by her own efforts, a weak inſpiration. This firſt important returning action of life, gave me great hopes that I might prove the happy inſtrument of reſuſcitating the infant.

I now repeated the diſtenſion of the lungs; and a diſpoſition for reſpiration on the part of the infant being evident, I

thought it prudent to commence gentle frictions on the ſurface of the body with the application of warmth, ſo as to ſupply the right ſide of the heart with blood to continue its actions; I likewiſe, with my finger moiſtened in brandy, ſtimulated the pharynx and glottis, with a view of increaſing the frequency of reſpiration, which by this time took place, once in two or three minutes; and as the child acquired power, it gradually increaſed.

The infant being naturally of a ſmall ſize, and of a very delicate conſtitution, rendered it doubtful for two or three days, whether ſhe could poſſibly ſurvive the ſhock which the ſyſtem had experienced; ſhe, however, then began to take liquid food rather freely, but was not ſufficiently ſtrong to ſuck for ten or twelve days; ſince which time ſhe takes the breaſt extremely well, is thriving, and with her mother in a very healthy ſtate.

The event of this caſe was certainly highly gratifying to my own feelings, and produced thoſe affectionate ſenſations in the parents, which are more eaſily conceived than deſcribed.

To the Editors of the Medical and Phyſical Journal.

GENTLEMEN,

IF you deem the following Caſe of Fiſtula in Ano, worthy of a place in your valuable publication, it is at your ſervice.

I am,

GENTLEMEN,

Your moſt obedient humble ſervant,

THO. WHATELY.

Bedford Row, Feb. 4th, 1800.

A Caſe of Fiſtula in Ano, accompanied with the Lodgement of a Plumb Stone in the Rectum; by THOMAS WHATELY, Member of the Corporation of Surgeons of London.

Mr. Chipperfield, at the Bell Great Carter-Lane, Doctors-Commons, aged 45, applied to me in September, 1799, for the cure of a fiſtula in ano, of more than ten years ſtanding. He had conſulted a ſurgeon on his caſe, at a very early period

of

of the diſeaſe, but was told, that he had not that complaint. The fiſtula continued nearly ſeven years in the ſame ſtate as at its firſt appearance. About the expiration of this time, he was ſeized with a violent diarrhœa, attended with conſiderable pain in the bowels, particularly in the rectum, and about the anus, where he very frequently felt a pricking and ſhooting. He was not able, after an evacuation, to cloſe the ſphincter ani, without great pain, which generally continued for three or four minutes: the ſymptoms continued with ſuch violence only two or three days; but from this time, till he applied to me, (a period of more than three years), he has been afflicted with a diarrhœa, and has generally had about four or five ſtools every day, and for the moſt part one every night. At each motion he was obliged to obey the moment the call came upon him. During this period he felt occaſionally ſome pain in the abdomen, and a pricking about the rectum. At intervals his ſtools would be ſomewhat ſolid; and he remembers to have frequently obſerved a diviſion, or mark, on one ſide of the fæces, as if ſomething had cut them in their paſſage, which he compared to a bullet, ſhot from a rifle-barrelled gun. About three or four days previous to his application to me, he was again ſeized with a violent diarrhœa, attended nearly with the ſame ſymptoms as at the prior attack. It was very ſevere for two days, and then almoſt entirely ceaſed; but the pain in the lower part of the abdomen, and about the anus, continued without much intermiſſion. In the day-time, it extended round his loins, and was often ſo violent on riſing from a chair, as to prevent his walking erect. In the night he was very reſtleſs, and for the moſt part deprived of ſleep.

Conceiving that he was not in a fit ſtate to undergo an operation, I adviſed him to take ſome doſes of caſtor oil; and after theſe, ſome opiates. By theſe means his complaints were leſſened; but they were by no means ſo much abated at the end of a week as I expected. From a ſuſpicion that there might be ſomething about the rectum, diſtinct from the fiſtula, from which his complaints aroſe, I begged him to let me examine the gut with my finger. To my great ſurprize, I ſoon felt a ſtone within the rectum, which I afterwards extracted by a pair of forceps. From this time all his complaints, except the fiſtula, entirely ceaſed, and he ſoon recovered a perfect ſtate of health. On examining the ſtone, I found it eat away on each ſide to a conſiderable depth; an edge nearly as ſharp as that of a knife being left. By this circumſtance, no doubt, all his complaints had been greatly aggravated.

At the end of ten days from the extraction of the ſtone, I cut him for the fiſtula. On introducing my finger into the

rectum for that purpoſe, I found the ſphincter narrower than uſual, which, probably, aroſe from the long continuance of the fiſtula. I could plainly feel within the gut, a kind of nidus, formed by a large fold of its internal coat; in this the ſtone had lain. The fiſtulous cavity communicated with the rectum higher up than it commonly does. From the opening in this part, the cavity of the rectum, and that of the fiſtula, were, by the operation, laid into one; after which the patient obtained a perfect cure in about a month.

From the hiſtory of this caſe, it appears very clearly, that the plumb-ſtone had continued in the loweſt part of the rectum upwards of three years. What prevented its diſcharge from this ſituation at any of the evacuations of the gut, was, probably, the contraction of the ſphincter, occaſioned by the long continuance of the fiſtula, previous to his ſwallowing the ſtone. Theſe concluſions are grounded on the length of time the diarrhœa continued, the eroded ſtate of the plumb-ſtone, the ceaſing of the diarrhœa from the time of the extraction of the ſtone, and the patient's having a better appetite, and a better ſtate of health, after the extraction of the ſtone, than he had experienced for the three preceeding years.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IF upon a peruſal of the encloſed, you find it worthy a place in your valuable publication, the author will find himſelf extremely gratified.

He is, very reſpectfully,
Your obedient ſervant,
DAVID UNWINS.

Grenville-Street, London,
Jan. 20, 1800.

The progreſs of every ſcience, and particularly that of Medicine, has been, in all ages, retarded by the *enthuſiaſm* of its profeſſors.

Calm reaſoning, cool deliberation, unprejudiced opinions, are qualities equally rare and deſirable.

It peculiarly behoves the profeſſors of the moſt important of all ſciences, to guard their minds againſt the reception of haſty

haſty and extravagant notions, either with regard to the theory or practice of medicine.

The general prevalence of infidelity and ſcepticiſm has been, with ſome degree of juſtice, attributed to enthuſiaſm in religion; and, perhaps, *Medical Enthuſiaſm*, (if the term is allowed,) has been attended with more evils than mankind in general are aware of.

Let it not be ſuppoſed, that their recommending moderation, the writer of this paper is an advocate for *indifference*, *inactivity*, or *negligence*; nothing is more remote from his deſign, than a wiſh to check either ardour or perſeverance; but the axiom of Horace, "*Est modus in rebus*," ſhould never, for a moment, be forgotten.

Theſe obſervations have been elicited by the peruſal of a paper which appeared in the *Medical and Phyſical Journal*, for *January*, written by Dr. *Huggan*.

It would be the extreme of injuſtice, to deny this gentleman the merit of ingenuity and piquancy in his communications; and I cannot but acknowledge myſelf very conſiderably indebted to him for ſome of his obſervations.

No one, however, who gives the ſubject the ſmalleſt conſideration, will deny the extreme impropriety of advancing the following aſſertion. Dr. *Huggan* ſays, when treating of Venæſection, "that this practice is *never neceſſary*, ſeldom ſafe, "often hurtful, and ſometimes fatal."

Perhaps the *comparative diſuſe* of the *lancet*, is one of the greateſt improvements in the *Modern Practice of Phyſic*. With great juſtneſs and veracity it may be ſaid, that *fevers* have been fatal to thouſands, and *Venæſection*, in *theſe diſorders*, to tens of thouſands.

The *Sangrado Practice* of univerſal and indiſcriminate depletion and relaxation, is now happily exploded by diſcerning and ſcientific practitioners; but the moſt uſeful article in the whole *Materia Medica*, might, with equal juſtice, be pronounced deſtitute of utility, as the practice of blood-letting.

The injudicious adminiſtration of *opium*, by which many valuable lives have been ſhortened, will not deter the medical practitioner from continuing to exhibit this uſeful medicine; thoſe, however, who have had occaſion to witneſs the fatal effects of its miſapplication, would be equally juſtified with Dr. *H.* in recommending its complete expulſion from the liſt of remedies.

May I be permitted to add a few words in favour of the practice, which this gentleman has recommended in *Synocha?*

The general inflammatory ſymptoms which have character-

ized this disease, have induced Physicians to omit the use of *opium*. This omission has arisen in consequence of mistaking the mere *effect* of the disease for the *disease* itself.

Dr. Huggan has very properly remarked, that the seat of the disorder, which has obtained the name (though, perhaps, erroneously) of Inflammatory Fever, is in the *Sentient System*; and as the operation of opium is now pretty generally acknowledged to be confined to the *Nerves*, its exhibition cannot fail of being attended with success in Synocha.

In support of this theory, the writer of the present article is very happy in having it in his power to adduce his own experience; as his practice has afforded him frequent opportunities of witnessing the beneficial effects of this valuable medicine in Inflammatory, and in *every other Species of Fever*.

To the Editors of the Medical and Physical Journal.

GENTLEMEN, *Weymouth, Jan.* 16, 1800.

IF you perceive any thing new, or practically useful, in the following Case, it is at your service, and I should be much gratified by its insertion in your valuable publication.

I was sent for, about eight o'clock in the morning of the 14th of November last, to visit a woman in the Island of Portland, who, as the messenger informed me, had cut her throat in so dangerous a manner, that her friends did not imagine she could possibly survive till my arrival. I found her in convulsions, and apparently expiring; her pulse imperceptible, and her extremities quite cold. I found a gaping transverse wound, of about seven inches in extent, with very ragged edges; it having been inflicted with an old rusty knife, nearly in the shape of a pruning knife. The trachea was most completely divided about an inch below the the larynx, quite through to the œsophagus, which was also slightly wounded. By her exertions, the divided extremities of the trachea were separated from each other full an inch. The carotid arteries, particularly the left, were laid bare, but fortunately only very slightly scratched. The left jugular vein was entirely divided, and had bled a considerable quantity; but the person who first went to her assistance, (almost at the moment of the accident) seeing the blood pouring from so large an orifice, with great presence of mind, instantly placed a plug of wet rag on the vessel, and kept his thumb

thumb firm on it, till I arrived, which was about three hours after the wound was inflicted. I first took up the vein, which bled very profusely on the pressure being removed; and after carefully removing as much as possible of the coagulated blood, which had plugged up the extremities of the trachea, I united the integuments by about half a dozen stitches, taking care to include in them as much as I conveniently could of the adipose substance and muscular fibres of the trachea. By confining her head to her breast with the greatest attention, and permitting no other food, during the first week, than that afforded by nutritive injection, she happily recovered, without any unpleasant symptom whatever; except that, on the third day, on attempting to swallow a little thin gruel, a great part of it made its way through the wound, and loosened the adhesive plaister which I applied to support the stitches.

The patient was about sixty years of age, of a regular and temperate habit, and the mother of a large family. I am,

GENTLEMEN,

Your most obedient humble servant,

STEPHEN P. BRYER,

Surgeon and Agent for Sick and Wounded Seamen and Marines at the Port of Weymouth.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Take the liberty to send you a few observations for insertion in your useful work. I cannot recommend them to your notice on the score of novelty; and whether they merit attention on any other claim, I submit to your better judgment. I am,

GENTLEMEN,

With much consideration,

Your very humble servant,

Yarmouth, Jan. 1800. S. C. BLYTH.

On the Use of Enemata; particularly in Cases of Gastritis, Enteritis, &c.

It is a matter of surprize to foreigners, that a mode of administering medicines so ancient, and withal so common in other

other countries, ſhould be comparatively rare in England. While people of other nations make uſe of Enemata as a domeſtic luxury, often independently of any real ailment; many practitioners in this country frequently ſuffer a patient who can keep nothing on his ſtomach, to languiſh in agonizing ſuſpenſe, before they will order for his relief, a remedy of the moſt obvious and ſalutary kind.

No mode of exhibiting medicines can be more comprehenſive than clyſters; they embrace almoſt every article of the Materia Medica, as well as of aliment, whoſe virtues can be imparted to a liquid. Beſides this, no great nicety is neceſſary in this preparation; which is an eſſential advantage when one conſiders the adulteration and the change or loſs of virtue, which medicines of importance too frequently undergo, in order to be accommodated to a ſqueamiſh palate, or what is ſtill worſe, to a capricious eye.

But the great advantage of this exhibition appears in caſes (and thoſe happening every day), wherein, from the exceſſive irritability of the ſtomach, nothing can be retained on it. This is not only the caſe in diſeaſes which have brought the patient very low, but in many others in an incipient ſtate; and this from a native irritability of fibre. Nor is this a matter new or extraordinary, as its truth every practitioner of experience can atteſt.

In inflammations of the ſtomach and bowels, I have been aſtoniſhed at the ſudden and happy changes effected by clyſters.

Among other caſes, an elderly gentleman in my neighbourhood was ſeized with the ordinary ſymptoms of Gaſtritis,—nauſea, difficulty of breathing, a ſenſe of intenſe heat about the præcordia, thirſt, and coldneſs of the extremities. I treated him according to the antiphlogiſtic plan in general; ordered pediluvia, warm fomentations, &c. but without relief. I then exhibited a laxative and antiſpaſmodic Enema; the ſymptoms immediately abated in their ſeverity, and he gradually recovered.

There are, indeed, few caſes in which clyſters of ſome ſort are contra-indicated. The eminent ſuperiority they claim is chiefly on the ſcore of their innocent operation. In caſes where they do no good, they ſeldom do harm, unleſs their compoſition be abſolutely poiſonous. In cholera morbus, when the patient has been nearly exhauſted, when hiccough and convulſions have beſpoke the deſperate ſtate of his caſe, timely exhibitions of this ſort have ſaved his life. In obſtinate cholics too, clyſters of this deſcription have effected a ſalutary evacuation, after all other means had failed. In affections of the bladder, and in

ſuppreſſions

ſuppreſſions of urine from ſpaſm, Enemata have been of ſurpriſing efficacy. In many fevers, ſometimes in typhus, when tonies could be adminiſtered no other way, they have in this ſhape anſwered the beſt purpoſes.

In the obſtinate intermittents of Carolina and Georgia, how frequently caſes have occurred when the patient was ſo exceſſively debilitated, and his ſtomach had ſo loſt its tone, that no medicine of the corroborant kind would ſtay a moment upon it; and when he has been expecting a renewed attack to carry him off, how often has a ſtrong decoction of the bark exhibited in this form, preſerved him from the threatened fit, and ſecured his perfect recovery!

In the bilious and yellow fevers of the Weſt Indies, wherein the ſymptoms of approaching death ſucceed each other with melancholy rapidity, the happieſt conſequences have followed theſe exhibitions; and it is unqueſtionable, that the ſucceſs of medical practitioners in the French iſlands, in treating the diſorders of hot climates, may be principally aſcribed to this mode of adminiſtering medicines. From the moſt inconſiderable headach to a ſanguineous apoplexy, the French preſcribe Enemata. Machines for this purpoſe are kept in every family, and are viewed with the familiarity of a culinary utenſil. So common a remedy indeed is it, that if one complaint, either in France or the colonies, of the ſlighteſt indiſpoſition, *un lavement* is ſure to be recommended. They conceive that moſt complaints originate in ſome inteſtinal obſtruction, (as, in fact, they often do) and that clyſters are a natural cleanſer, as the word imports. Viewed as a mode of giving food, caſes abound, in which patients have been kept alive for weeks by nouriſhing clyſters, when aliment could be adminiſtered in no other way.

It is unneceſſary here to arrange the various formulæ of Enemata in vogue; they are not confined to number nor quality; they comprehend (to repeat what has been before aſſerted) almoſt every article of an alimentary and medicinal nature.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

YOU did me the honour, in a former Number, to inſert my letter to the DUKE of YORK on the treatment of Dyſentery. I now incloſe a few additional reflections on the ſame ſubject, extracted

extracted from my report of laſt week, to the Commiſſioners for Sick and Wounded Seamen. By inſerting them alſo, you will oblige,

GENTLEMEN,

Your moſt obedient ſervant,

Atlas, Torbay, Nov. 30, 1799. D. WHYTE.

Extract from the Weekly Return of the Sick and Wounded of His Majeſty's Ship Atlas. Dated off Breſt, November 20, 1799.

It has been univerſally remarked, that dyſenteries are more frequent in Autumn than any other ſeaſon; and it may be aſked, to what cauſe is this prevalence to be aſcribed? I would anſwer, that the inteſtines participate in the general debility induced by the preceding ſummer heat; and that, as the ſun recedes from our hemiſphere, we are many of us too neglectful of increaſing, with the decreaſe of temperature, the quantity and conſiſtence of our cloathing. In moſt ſeamen, to the prediſpoſing debility occaſioned by heat, is ſuperadded and combined the prediſpoſition ariſing from ſcurvy. To excite diſeaſe in perſons ſo circumſtanced, the ſlighteſt expoſure to cold and moiſture is alone neceſſary,

In a former return, I noticed to you my new method of ſucceſsfully managing this otherwiſe dreadful and almoſt irreſiſtible diſeaſe. My experience during the laſt fortnight, not only confirms the deductions I at that time made, but the circumſtances of ſome of the caſes have led to ſtill farther practical improvements; the chief of which is, in the firſt place, and previous to the application of the flannel rollers, to inveſt the whole of the abdominal and lumbar regions with a large and cloſely applied adheſive plaiſter. Where the diſeaſe has been of ſeveral days ſtanding, ſimilar plaſters applied over the glutœi muſcles, and ſome way down the thighs, are ſingularly efficacious; enemas of flour and water, or of ſtarch, or of arrow root, are alſo in ſuch caſes uſeful.

In an irregular patient, I found that wine, ardent ſpirits, and high ſeaſoned food, exacerbated every ſymptom; and had he not at laſt been prevailed upon to leave off thoſe pernicious ſtimuli, his life would in all probability have been paid as the forfeit of his folly. The diſeaſe was alſo exacerbated by every fluid of a high temperature, while the ſame fluid cooled to, or below the temperature of 96° could be drank with comparative impunity. By the abſtraction of ſixty ounces of blood, this

this patient was put out of danger; and ſo eaſily was the ſupervening debility removed by proper regimen, that in five days he was able to return to his uſual occupations. Had he been regular from the beginning, the cure (as he was of a weak conſtitution, and eaſily affected by remedies, as well as exciting cauſes) might have been completed in a few hours without any, or at leaſt, with a very moderate venæſection.

Dilution I do not now find neceſſary; I am even inclined to believe that it is always more or leſs hurtful.

As articles of diet, animal and vegetable mucilages ought on every principle of reaſon and humanity to be alone employed. Beef tea, chicken and mutton broth, boiled to the conſiſtence of a jelly, are of all others moſt palatable and proper. In my preſent humble practice, however, the generality of my patients are under the neceſſity of reſting contented with portable ſoup, ſago, and flour and water.

Much of what I have here ſaid is referable only to neglected caſes. Where the patient makes his application on the day of attack, avoids further expoſure, and leaves off diffuſive and other ſtrong ſtimuli, an adheſive plaſter applied to the abdominal ſurface, over that a few folds of flannel roller, with a ſingle venæſection, moderate or copious according to circumſtances, will in moſt caſes be fully ſufficient for the removal of every ſympton of dyſentery.

I have in the firſt place to obſerve, that large quantities of acid, or alkali, or of any of the neutral ſalts formed by their combinatian, will, after paſſing the pylorus, by their direct ſtimulus, excite frequent dejections, accompanſed, if long continued, with intenſe tormina, teneſinus, and every other dyſenteric ſymptom; but I have to obſerve, in the ſecond place, that the generality of dyſentries owe not their origin to the direct ſtimulus of ſuch cauſes; and thirdly, that where they do, as ſuch ſubſtances neceſſarily operate their own diſcharge, alkalies are not the moſt proper remedies when the diſeaſe is excited by acids, nor acids when it is cauſed by alkalies. Beſides, as I have already mentioned, the acid and alkali may prove purgative, even when combined.

That the tranſatlantic ſpecific for dyſentery has a tendency to excite it, I have had frequent opportunities of obſerving.

For the removal of acidity of the ſtomach, to which ſeveral of the gentlemen of this ſhip are extremely ſubject, I have long had daily occaſion to exhibit aqua kali; and I have found, that in certain conditions of the weather, and of the patient's irritability, it has occaſioned griping and diarrhœa, which, if not timely checked by very different remedies from thoſe propoſed by the very eloquent Doctor Mitchill, might have

degenerated into dyſentery ſtrictly ſo called. In farther confirmation, I may add, that the irregular patient above alluded to, had for upwards of a year been, for the removal of arthritic predispoſition, in the habit of taking half a drachm of kali ppt. the dyſenteric ſpecific of Dr. Mitchill, twice a day. He had more than once, when in cold and moiſt weather lightly cloathed, perceived its inſtant purgative effect; but on falling ſick, the fruit of dear bought experience was of no avail, his faculties became impaired, and he was no longer capable of regulating his conduct by the rules of ſcience. Unaware of the danger, he was fooliſh enough to take, on the evening of attack, his cuſtomary alkaline doſe, and alſo twice to repeat it on the following day. Each time, as *a priori* might have been expected, it increaſed both purging and tormina

Such are the arguments I have derived from experience, in oppoſition to the doctrine of the ingenious Dr. Mitchill: I am alſo prepared to combat them in theory; but this I muſt defer till I can enjoy a leiſure and retirement more propitious to literary purſuits than my preſent confined and laborious ſituation will admit.

Letter from Mr. Stewart *to Dr.* Remmett, *on the Vaccine Inoculation. Communicated by Dr.* Pearson.

Dear Sir,

I Am happy in having it in my power to communicate *forty-three* ſucceſsful caſes of inoculation with vaccine matter; and to thank you for the matter which you ſo obligingly ſent me. With the lancet you received from Dr. Pearſon, I inoculated the firſt caſe; but in no inſtance could I ſucceed with the thread.*

I ſhall do myſelf the honor, at ſome future period, to tranſmit two caſes, which go far to prove that cow-pock contagion cannot be communicated by effluvia.

First Case.

Maſter Peter Curgenven, a healthy child, aged thirteen weeks, was inoculated with cow-pock matter on Friday, November 1, 1799.

Fourth

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* The thread was impregnated with matter, and the lancet was ſtained at the ſame time from the ſame puſtule.—Dr. Pearson.

Fourth day, A ſmall elevated ſpot appeared on the part inoculated.

Sixth day, Slight inflammation round the edges of the puſtule.

Seventh day, A beautiful faint bluſh around the inciſed part, of the ſize of a ſeven ſhilling gold coin.

Eighth day, Inflammation increaſing, the puſtule larger than in the inoculated ſmall pox; ſkin cool.

Ninth day, Slight rigors; the child vomited once; puſtulous fluid limpid, ſkin cool, pulſe natural.

Tenth day, The puſtule beginning to cruſt; no appearance of indiſpoſition.

Eleventh day, Inflammation ſubſiding.

Eighteenth day, The ſcab ſloughed off. There were no eruptions.

Dec. 16th, Maſter Peter Curgenven was inoculated with active variolous matter.

Dec. 17th, Inflammation around the part punctured very conſiderable.

Dec. 18th, Inflammation appears to increaſe.

Dec. 19th, The part inoculated has ſtill an appearance as if the infection had taken.

Dec 20th, The inflammation ſubſiding.

Dec 21ſt, Inflammation gone; the child has not been indiſpoſed, nor had any puſtules; his arm is well.

SECOND CASE.

From the arm of Maſter Peter Curgenven, matter was taken, Nov. 11, and inſerted into both arms of John Luthbridge, of a ſcrophulous habit, aged eighteen months.

Fourth day after inoculation, appearances ſimilar to Maſter Peter Curgenven's.

Fifth day, He became indiſpoſed, and was affected with the common ſymptoms of a patient ſickening with the ſmall-pox.

Sixth day, Severall ſmall eruptions on different parts of the body; ſkin cool.

Seventh day, Eruptions increaſed in number and ſize, the puſtules on the inciſed parts alſo increaſing; ſlight inflammation.

Eighth day, The eruptions beginning to diſappear; none of them became purulent; the puſtules and inflammation of the inciſed parts ſtill continue to increaſe; ſlight ſymptoms of fever.

Ninth day, The puſtules on the parts inoculated beginning to cruſt; no complaint.

Twentieth day, The ſcabs ſloughed off.

Dec. 3d, He was inoculated with variolous matter without effect. And, on the 16th, limpid variolous matter was inſerted in both arms, but no diſeaſe enſued.

THIRD CASE.

On the 15th of November, I inoculated Miſs E. Reed with cow-pock matter. The appearance of the arm, &c. ſimilar to thoſe of Maſter P. Curgenven, untill the ninth day, when ſlight feveriſh ſymptoms ſupervened, and continued until the evening of the tenth day.

Eleventh day, No diſeaſe.

Dec. 3d, She was inoculated with active variolous matter.

Dec. 9th, She has not taken the infection.

FOURTH CASE.

Vaccine matter taken from the arm of Miſs E. Reed, and inſerted into the arm of Mary-Ann Moore, aged five years, produced a very mild diſeaſe.

FIFTH CASE.

Miſs Collins, aged eight weeks, was inoculated with matter taken from the arm of Mary-Ann Moore.

Eleventh day, Slight feveriſh ſymptoms; the puſtule on the arm ſmaller than in any of the preceding caſes.

Twelfth day, The child appears quite well.

In thirty-eight caſes, the appearances were ſo ſimilar to the preceding, that I ſhould treſpaſs on your time to enter farther in detail upon the ſubject. There are no eruptions, nor have any ſore arms been produced; and the conſtitutional affection, or fever, which occurred about the ninth day after inoculation, was much leſs conſiderable than even in favourable caſes of inoculated ſmall-pox. I am, therefore, firmly of opinion, that the cow-pock inoculation is attended with many advantages ſufficient to force its way into general practice here, notwithſtanding the oppoſition and crafty inſinuations of intereſted Practitioners.

To obviate the evil intentions of ſuch men, the following hiſtory is ſubjoined:

John M'Cubbin's child, aged two days, on account of his mother being ill with the ſmall-pox when he was born, was inoculated with vaccine matter on Tueſday, 21ſt of January.

Saturday, 4th day, As it was doubtful whether or not the infection had taken place, it was determined to inoculate him a ſecond time with recent matter, which could not, in the courſe of this day, be conveniently procured.

Sunday, 5th day, The punctured part of the right arm is ſlightly inflamed, and of a puſtular form.

Monday, 6th day, The child was very ill all night, with frequent vomiting and bleeding at the noſe, and other ſymptoms denoting

denoting much conſtitutional diſeaſe. From the bleeding at the noſe, alteration of the countenance, &c. we ſuſpected the ſeat of the diſeaſe to be in the head; there was not, however, the ſlighteſt mark of injury to be perceived externally. He died about one o'clock this afternoon. Upon inſpecting his head, in preſence of Dr. Huggan, we found that by preſſing on the fontanelle and back part of the os frontis, blood iſſued from the noſe.

The ſcalp covering the left parietal bone, and the correſponding part of the occipital, was thickened and diſcoloured the ſubjacent part of the pericranium to a greater extent was much inflamed. The occipital and left parietal bones, which it covered, were of a dark red colour. Between the dura mater and ſcull of the ſame ſide, there was a great quantity of extravaſated blood; and the brain itſelf underneath was alſo ſlightly inflamed.

That the morbid appearances above deſcribed, were the conſequence of external violence, though that could not be aſcertained, will not be doubted. Nor is it material whether we ſuppoſe the inflammation or the extravaſation of blood, to have been the immediate cauſe of his death; as this caſe is not communicated with any practical view, but merely, that the unbiaſſed and intelligent part of the profeſſion may judge how much, or rather how little a ſhare the cow-pock had in occaſioning it. As a report has been ſpread abroad, evidently for the purpoſe of diſcouraging the progreſs of the cow-pock, that the child died of this diſeaſe, it was judged neceſſary to deſcribe the morbid appearances, which we diſcovered on diſſection.

I am,

DEAR SIR,

With reſpect and eſteem,

Your very humble ſervant,

Plymouth, Jan. 31, 1800. THOMAS STEWART, Surgeon.

To Dr. REMMETT.

To DOCTOR PEARSON.

MY DEAR SIR,

YOU will be pleaſed with the report which accompanies this letter; and when you have peruſed it, you will have the goodneſs to tranſmit it for inſertion in the next Number of the Medical and Phyſical Journal. For the authenticity of ſeveral of the firſt caſes, I am myſelf reſponſible; and with reſpect to all, I aſſure you, that I know no man better entitled to credit than my reſpectable friend Stewart. I wiſh to add concerning

Luthbridg

Luthbridge, that I never thought the eruption, which took place prior to the attack of the vaccine disease, of a variolous nature; and that the boy has now again a similar eruption attended with some degree of fever.

It seems necessary to publish the case of M'Cubbins; and I am glad to inform you, that the mother is recovering from her highly confluent small-pox, unfortunate as was the period of attack. Had the child lived, the efficacy of the vaccine infection, in preventing that of the small pox, would, I have no doubt, been strikingly manifested. The case would, indeed, have been a very important one. The threads, though used by many, have not produced the disease in any one instance within my knowledge, I am,

MY DEAR SIR,
Most truly, your's
Plymouth, Feb. 6, 1800. R. B. REMMETT.

To the Editors of the Medical and Physical Journal.

Harwich, General Hospital.
GENTLEMEN, *January* 27, 1800.

IF the following Case, to which I was called in, a few hours previous to its fatal termination, should appear to you as it does to me, remarkable in some of its circumstances, I beg you will insert it in your very useful publication; and am,

GENTLEMEN,
Your obedient humble servant,
W. R. SHAPTER, M. D.
Inspector of Hospitals.

M. B. aged 22, wife of a sailor belonging to a gun-vessel, being advanced in pregnancy from six to seven months, went on board with her husband on the 25th December, 1799, and came ashore two or three days after. Her looks were remarked by her friends to be particularly wild; but she made no complaint, following her usual occupation of washing, until the evening of the 30th, when she complained of a severe head-ach. The next morning she came down stairs in a state of delirium, talking incoherently and unintelligibly, and vomited several times a billious matter. Apprehending the approach of labour, Mr. Hopkins, surgeon of this town

was

was sent for, who, on examination, finding no symptoms of that kind, directed two grains of antimonial tartar to be given immediately; soon after which the vomiting ceased. In the afternoon the delirium still continued, and early in the evening she was violently and universally convulsed, succeeded by stupor, which continued alternately through the night. Her teeth were closed, so that no liquid could be got down, and she frothed very much at the mouth. Pulse small and quick. No stool.

On the first of January, 1800, there were intervals of nearly an hour between each fit of convulsion, but only a small quantity of fluid could be administered. Blisters were applied to the back and legs; and an enema was injected, which produced one moderate evacuation. She became more easy towards evening, seeming to express a soreness of her throat and tongue; and in the middle of the night, for the first time spoke, saying, she was hungry, and eat some mouthfuls greedily, yet did not appear to know any person about her.

The morning of the 2d, her fits recurred, although with less violence; after which she remained comatose. Her head being shaved, the scalp appeared generally but slightly oedematous; no particular mark of injury, or sign of uneasiness on pressure, could be discovered. The pupil contracted freely on exposure to light. Pulse 144. In the afternoon, a cathartic mixture was ordered; only a small quantity was swallowed, which produced no effect; and a blister was applied to her head.

3d January. She died about four o'clock this morning.

On examination after death, there was no appearance of fracture of the cranium. The membranes were redder, and the larger blood vessels more distended than natural, but no extravasation, nor any thing uncommon in the substance or cavities of the brain.

In the abdomen; the uterus, of considerable size, contained a female fœtus, which, from its putrid state and flabby consistence, appeared to have been dead for a much longer time than the period of the symptoms above recounted. The rest of the abdominal viscera were perfectly sound, except the stomach, in which was a remarkable degree of inflammation of the internal coat, extending from the cardia in every direction about two inches, perfectly circumscribed, and of a deep scarlet colour, interspersed with very minute black spots.

The thorax was not examined.

Induced by these appearances to make farther inquiry of her friends, they could give no account of what had happened

to

to her on board the veſſel, as her huſband had ſailed; ſhe had drank half a glaſs of rum previous to her going into the boat, the crew of which were all drunk, as ſhe expreſſed on her return, and that there was ſo much confuſion among them, ſhe knew not how ſhe got on board.

She bore a character of being at all times very temperate, and not in the leaſt addicted to drinking ſpirituous liquors.

To the Editors of the Medical and Phyſical Journal.

GENTLEMEN,

ON peruſing a letter, inſerted in the XIth Number of your Medical and Phyſical Journal, ſigned A HUGGAN, wherein that gentleman objects to the practice of bleeding, in the Croup, I thought it incumbent upon me, among many others who have had much experience in that diſeaſe to offer ſome remarks upon it.

As I have already laid before the public my plan of treatment in the Croup, I ſhall confine myſelf to that part wherein Dr. HUGGAN's practice ſo ſtrenuouſly oppoſes mine.*

He tells us, that his experience authorizes him to ſay, that opium, in the form of tincture, will, if in a doſe proportionate to the violence of the diſeaſe, give relief as ſpeedily as venæſection, or any other remedy. He afterwards acknowledges, that his practice in this diſeaſe has not been very conſiderable; but from the little that has fallen within his own obſervation, he cannot too forcibly deprecate the uſe of the lancet.

The ſucceſsful caſes which fell under this gentleman's care, muſt certainly (in my opinion) have been merely a ſpaſmodic affection of the muſcles of the glottis, that may, no doubt, give way to the uſe of opium; but, ſurely, it never could have been that ſtate of the diſeaſe, termed Cynanche Trachealis; as in that caſe, unleſs a general depletion had preceded its introduction, an aggravation of the ſymptoms, rather than a diminution, would, more probably, have been the conſequence.

I have had a number of ſucceſsful caſes of genuine or inflammatory Croup, in all of which, bleeding by leeches has been my principal dependance; and the greater part of them, I am very well aſſured, would have terminated fatally, if ſuch a plan had not

* Medical and Phyſical Journal, Vol. I. p. 510.

not been vigorously purſued. For the truth of this aſſertion, I can claim the ſupport of men of the firſt eminence in their profeſſion. But I wiſh to be underſtood, that although my chief dependence is on bleeding, I never omitted the other uſual antiphlogiſtic remedies. In that ſtate of the diſeaſe termed Spaſmodic Croup, I have frequently found that a gentle emetic, and the uſe of the warm-bath, have removed every bad ſymptom.

There is not one poſſible thing, in my opinion, which can depreciate the ſcience of medicine to a greater degree (with all deſcriptions of people), than where profeſſional men are ſo continually differing with and oppoſing each other in their practice; and ſuch is the preſent enlightened age, that there are few men who do not make the ſcience of the healing art a part of their ſtudies:—How great, then, muſt be their ſurprize, to ſee that even thoſe eſtabliſhed points, which have ſtood the teſt and experience of ages, and now continue as firmly eſtabliſhed as ever, cannot eſcape the attack of ſome of the profeſſion!

If you are of opinion, Gentlemen, that the facts and obſervations which I have made, may tend to eſtabliſh a more accurate idea of the Modus Curandi of this very formidable diſeaſe, for thoſe practitioners who may not have had many opportunities of meeting with it, you will oblige me by introducing them in a future Number of your uſeful publication.

I am, GENTLEMEN,
Very reſpectfully,
Your humble ſervant,

Alceſter, Feb. 10, 1800. T. PURTON.

To the Editors of the Medical and Physical Journal.

GENTLEMEN, *Plymouth, Dec.* 31, 1799.

THE introduction of the Cow-pox into practice, as a ſubſtitute for the Small-pox, having been found to be expedient, in the moſt extenſive ſenſe of the word, the diſcuſſion of the ſubject will, of courſe, be conſidered as cloſed. This is a circumſtance truly honourable to Dr. JENNER, by whom this beneficial improvement, doubtleſs one of the moſt important in Medicine, has been firſt made known to the world.

Exegit monumentum, ære perennius,
Quod non——
Poſſit diruere, aut innumerabilis
Annorum, ſeries, et fuga temporum.

The zeal with which Dr. Pearſon did, as is well known, ſo early and aſſiduouſly inveſtigate all the facts belonging to this new diſeaſe; and, when ſatisfied, from his own experience, of the propriety of introducing it into practice, his further endeavours to make his ſentiments as publicly known, and the advantages of the *new inoculation* as extenſively felt by the community at large as poſſible, do equal honour to his feelings as a man, and his judgment as a phyſician. Their opinion of its utility, and that of Dr. Woodville, (deſervedly carrying much weight from his high profeſſional rank) having been confirmed by the reports of ſome of the moſt reſpectable of the profeſſion, not only in Britain, but on the continent; there is not much fear now of the public confidence being likely to be weakened by the miſrepreſentations of perſons intereſted in oppoſing its progreſs, far leſs from the "ignorance" and "preſumption of ſcioliſts."

Notwithſtanding, however, and what will hardly be credited, the introduction of the new practice here, as well as in ſome other parts of this county, has been oppoſed by profeſſional men with a degree of acrimony very unbecoming the medical character.—"Reptiles that plant themſelves in the high road of improvement, and try to hiſs back all that would advance."

Failure in inoculation, independent of prejudice, has contributed in a great meaſure to retard the progreſs of the new inoculation here, till of late, Mr. Stewart, an active and intelligent ſurgeon in Plymouth, has been more fortunate in that reſpect. The mildneſs with which all his patients had the diſeaſe (aſtoniſhing in the eyes of people who had been told ſo many ridiculous ſtories about its beſtial nature,) has, on the recommendation of Dr. Remmett, the principal phyſician here, induced ſome of the reſpectable inhabitants to have the diſeaſe introduced into their families. From the judicious arrangements which Mr. Stewart had made in his inoculations, he has, hitherto, been able to procure the matter in a recent ſtate from the arm of a patient, when he wanted it for that purpoſe, (as that has been enjoined as a circumſtance requiring particular attention,) and is in hopes of being able to do the ſame through the winter; ſo that the benefits of the new inoculation will ſoon be as readily acknowledged, and generally experienced, in this town and neighbourhood, and in other parts of the kingdom. When I hear of medical men ridiculing the cow-pox, ſeemingly with the view of preventing its advantages from being experimentally aſcertained by that part of the community, who have been wheedled into a miſtaken confidence in their candour, I cannot help ſuſpecting the oppoſition of ſuch men to proceed from motives, other than thoſe

of

of *conviction*, especially if their professional rank does not allow us to impute to them *ignorance*, or *want* of *discernment*. What medical man of candour, or professional information, would attempt to resist the force of so great and incontrovertible a mass of evidence of the utility of the new practice, or the high authority on which it has been so strongly recommended?

Having allowed myself to doubt the expediency of this new inoculation, from the perusal of an anonymous letter in the Annals of Medicine (Vol. III. p. 446,) when I was in Ireland, I was not undeceived till some time after my return to England, when I met with Vol. II. of the Medicina Nautica, in which the benevolent and learned author had inserted Dr. Pearson's Corollaries on the Cow-pox, seemingly with the view of recommending the introduction of it into the navy, in addition to the other improvements that have been made in that important department of the public service, since his appointment of Physician of the Fleet. Induced by so great an authority, I readily embraced the first opportunity of trying the new practice that should occur; and though my first experiment, which was made in September last, was not very encouraging, yet I was determined to persevere, till I could, from my own experience, form a decided opinion on the subject, which, I think, I have been able to do to my satisfaction; and from the result of which shall, with your permission, take the liberty of briefly stating the superior advantages of the Vaccine Inoculation over the Variolous. The first case was from particular, though unavoidable circumstances, rather an exception to our after-experience of the mildness of the disease.

A woman, (the only adult whom I have inoculated,) had the eruptive fever, equally as severe as it is commonly in the small-pox with grown people; the inflammation of the arm more troublesome, but, upon the whole, the period of the disease was shorter, in consequence of the absence of eruptions.

The eruptive fever was milder than in the small-pox; in infants, barely perceptible.

During the variolous eruptive fever in children, the eruption is sometimes ushered in with epileptic fits, which, though generally the fore-runners of a mild disease, are nevertheless alarming, and have, in some instances, proved fatal. These did not accompany the eruptive fever in any of our patients. In one case of a female child, two years old, the mother was alarmed from her starting suddenly, drawing in her arms and legs, and writhing her body, as if in pain, as was supposed, from her crying so vehemently at the time.

A sore throat, or painful and tedious abscesses about the ax-

illa, often accompany, or immediately follow the ſmall-pox. None of my patients, (except the woman before mentioned) had a ſingle troubleſome ſymptom after the fever had gone off; nor are any of them likely to be afflicted with ſcrofula, &c. which have been known to follow the ſmall-pox, even under its mildeſt form.

In the ſmall-pox often, and that after every appearance of danger has ſubſided, the diſeaſe is rendered tedious from the number of the puſtules, &c. The trifling eruption which a few of my patients had, did not in the ſmalleſt degree protract the diſeaſe.

In the ſmall-pox, eſpecially if the eruptive fever is violent, and the eruptions numerous and painful, emetics, opiates, &c. are indiſpenſably neceſſary. Only one of my patients required any medicine.

Another advantage of the cow-pox, as we learn from Dr. Jenner, but which, in the preſent ſtate of its progreſs, muſt not yet be counted upon, is, that it is never communicated by effluvia; therefore, it would appear from this, that, however ſimilar in their appearances, &c. the variolous and vaccine are, they are really different ſpecific diſeaſes.* Now if, after a general inoculation, (a circumſtanee which, from the Reverend Mr. Holt's letter, appears to be neither impracticable nor likely to be attended with much public inconvenience) every child was inoculated, at a certain age, with cow-pox matter, we might reaſonably calculate that the period was not far diſtant, when one of the moſt loathſome diſeaſes, and moſt deſtructive of human comfort, of any to which the human race is liable, would be entirely extinguiſhed, and when it would become equally as unknown in this iſland, although not leſs dreaded, than the plague is by us of the preſent day.

As it ſeems at length to be agreed on all hands, that the human body, after having undergone the vaccine, is perfectly ſecure againſt the infection of the variolous diſeaſe, it is certainly but of ſecondary conſideration, whether the latter renders the body

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* Some of the Readers of this Journal, who are of the ſame opinion, may, perhaps, conſider the confidence with which the contrary has been ſo roundly affirmed, (*Monthly Magazine for June laſt*) as bordering upon preſumption. It has been aſſerted, and that without the leaſt ſhadow of proof, that the Cow-pox is only the Small-pox having undergone a certain modification, by paſſing through the quadruped; and that it will degenerate into Small-pox again, by paſſing a ſeries of times from one human being to another, without interruption. The author of this opinion, however, not ſatisfied with the grounds on which he reſts it, intends, he tells us, to determine this point by experiments, the reſult of which he promiſes to lay before the public.

body unſuſceptible of the former, as this is, when compared with the confluent ſmall-pox a very mild diſeaſe; and as it is not received by effluvia, it would ſeem to be in ſome degree voluntary, on the part of any individual, to have it at all.—But local puſtules only, are by no means allowed to be a proof of any perſons having had either one or the other of theſe diſeaſes.

T. R. aged ſeventeen years, was in June 1795, inoculated for the ſmall-pox; a puſtule containing matter, appeared upon the punctured part, but without any conſtitutional fever. In the ſpring 1797, he was taken ill with ſmall-pox, which proved of the confluent kind, of which, after many fears entertained about the event of his recovery, he at length got well. Whilſt writing this, I have upon my left arm a vaccine puſtule from inoculation that has been very painful, without, however, any other conſequences.

[To be continued in our next Number.]

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

A Report having been in circulation for ſome time paſt in the Fleet, that a quantity of ſilk goods had been damaged and ſpoiled for ſale, by being fumigated with the nitrous acid vapour, under the idea of deſtroying peſtilential infection, which was ſuppoſed to exiſt in a ſhip in the river Thames, juſt arrived from a port in the Mediterranean,—ſhould this circumſtance have come within the knowledge of any of your Readers, who may be pleaſed to communicate the particulars to me, in any manner moſt agreeable, I ſhall conſider myſelf extremely obliged. Medical gentlemen, who may be acquainted with the ſhare which I have taken in this diſcuſſion, will readily believe that ſomething more than mere curioſity has prompted me to make the inquiry. The ſubject is at all times intereſting to profeſſional men; but particularly ſo during the war, and while there is a dread of the plague being imported into the country, by our commerce. You muſt have heard, that it has been propoſed to fumigate the cloathing of ſeamen in this manner; ſuch an occurrence, therefore, at the chemical period of the eighteenth century, as exhibited on the London wharf, will be a uſeful beacon to naval ſervice.

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In tracing the hiſtory of Fumigation to remote ages, I find it a matter of ſome difficulty to diſtinguiſh, whether it originally belonged to *Necromancy* or *Medicine*; but in thoſe times, a groſs ſuperſtition equally conducted the cure of diſeaſes and caſting out devils. In the Book of TOBIT, the inquiſitive reader will find a curious ſpecimen of this practice, where the *Devil* was expelled by the ſmoke and ſmell produced by burning the heart and liver of a fiſh, on the aſhes of perfumes. The context is highly entertaining. But *evil ſpirits*, in later times, have felt the omnipotence of fumigation. Lilly informs us, that "one Evans having raiſed a ſpirit, at the requeſt of Lord Bothwell and Sir K. Digby, and forgetting a *fumigation*, the ſpirit, vexed at the diſappointment, pulled him out of the circle, and carried him from his houſe in the Minories into a field near Batterſea Cauſeway.

It is worthy of remark, that the *oxygenated muriatic acid gas*, which, at the beginning of the war, was thought to do wonders againſt contagion, in the hands of French phyſicians, is already utterly forgot: yet the employment of this fume is ſaid to have given the firſt hint for the preparation of the nitrous vapour.* A late letter from Dr. Mitchell of New York, acquaints me, that a Committee of Phyſicians, at Montpellier, had tranſmitted to the Secretary of the American States, a receipt for fumigation againſt the Yellow Fever. It recommends *ſmoking tobacco, burning pine-wood* in the ſtreets, and fumigating the chambers of the ſick with *caſcarilla!* The powder for fumigation, which was tried on the ten convicts at Moſcow, in 1770, who were expoſed to infected cloaths and bedding, was then ſaid to be effectual againſt the plague. It conſiſted of *leaves of juniper, juniper berries, ears of wheat, lign. guaiacum, ſalt petre, ſulphur, tar, and myrrh.* We ſuſpect this compoſition muſt have quickly fallen into diſrepute; for, as being of Ruſſian origin, it would have been employed to check the mortality which continues among the ſoldiers of that nation at Jerſey and Guernſey. It was a good idea of the Roman chief who inſtituted the *Secular Games*, during the ravages of a plague at Rome; for thoſe amuſements might contribute to engage the attention of the multitude, and thus, in ſome meaſure, fortify the conſtitution againſt infection. But here alſo the ſpirit of fumigation prevailed, and *ſulphur* was ſerved out to the people for that purpoſe. Theſe *formulæ* are a few out of a number in my memorandum-book: you may obſerve their general character; like the *vinegar of the four thieves*, they are all

* Beddoes's Conſiderations on Airs, Part V.

all directed, by the pungent smell, to relieve the nose. The common fate which has awaited the whole, exhibits a miserable picture of medical fashions, and holds up but poor consolation to human nature, under the scourge of its most dreadful foe, impending pestilence. I am,

GENTLEMEN,

Your most humble servant

T. TROTTER.

Carwsand Bay,
February 1, 1800.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN the London Medical Review of last month, I find a paper of mine is inserted, in reply to a preceding letter of Dr. Pearson's, on the subject of "Eruptions appearing in the Vaccine Inoculation." Dr. P. objected to the hypothesis of variolous contamination being the cause of the appearance of these eruptions; and the object of the paper I sent, was to maintain the very point which Dr P. reprobated. The *datum* I assumed (I presume a very reasonable one) was, that "*Eruptions do not appear in the practice of this neighbourhood;*" and that, therefore, till Dr. P. could assign a satisfactory cause for this circumstance, there would still be a hesitation, indeed an absolute refusal, to admit that the vaccine poison does, *per se*, produce the variolous-like eruptions in question.

Since the days of Lord Bacon, argument has not been allowed in Natural Philosophy further than in the way of deduction from fact or experiment; and to this rule, this law of modern philosophizing, I presume, the further arguments I shall now proceed to deduce, in reply to Dr. P. will not be found opposite.

These eruptions do certainly not proceed (as a large burden in severe small-pox) from peculiar virulence in the disease, for in a state of the most virulent prevalence, (I speak positively from immediate observation) cow-pox has not been found to vary its usual aspect.

If, then, these eruptions do not consecutively follow virulence in the disease, they do not proceed from the disease itself, but from the constitution of the patient. There can be no other reason assigned, why in two persons inoculated with the *same matter*, one shall have the disease worse than the other.

other. What then eſtabliſhes virulence in this diſeaſe (excluding accidents and circumſtances) but conſtitution? Of courſe, virulence and conſtitution are ſynonymous, and eruptions cannot be the natural and neceſſary conſequence of one or the other.

If, then, theſe eruptions are not the effect of virulence or conſtitution, from whence either do they or can they proceed, but from the ſuppoſition of variolous contamination?

I underſtand, that cow-pox is not communicable by effluvia, *without* theſe eruptions; how comes it to have it *with* them? (In fact, any change of property acquired through eruptions, has the ſame force in the argument as a datum). If this contagious property, or rather variolous, appertained to pure cow-pox, it ought to have it in one ſtage as well as another. This is a dilemma which, I preſume, nothing but the hypotheſis of variolous contamination can reſolve.

It ſeems to me an exception to the uſual claſſifications of the Noſologiæ, that the ſame diſeaſe ſhould poſſeſs contrary properties, or, indeed: that any thing elſe ſhould, at the ſame time. In pure phyſics, aſſuredly, it cannot; yet here is cow-pox pure in one patient, and variolated cow-pox in another. Analogous cauſes produce anomalous effects.

Theſe eruptions are not ſecondary, as in cow-pox; but primary, as in ſmall-pox.

Inoculated cow-pox is plainly a topical diſeaſe, as to outward aſpect: how comes it that it would loſe this locality of aſpect, and become like ſmall-pox?

In ſmall-pox, ſomething is expelled by Nature externally from the ſkin, viz. puſtules; but cow-pox has the ſame effect, without operating in this mode upon the ſkin, by alteration without expulſion. If ſo, with ſimilar conſequences, the two diſeaſes are diſſimilar in operation; how come they, then, to be ſimilar?

Small-pox certainly has ſometimes a ſimilar effect, but this is plainly owing to its mildneſs; and in a virulent ſtate, it is always attended with a heavy burden: but this, it has been proved, is not a conſequence of virulence in cow-pox, (however Dr. Woodville's claſſical and elegant pamphlet would inſinuate as much*) and therefore the argument from hence fails.

But

* If Dr. W. could pronounce Cow-pox, with all his bad caſes of it, a much milder diſeaſe than Small-pox, what muſt it be in the practice of it elſewhere? I allow Dr. Woodville all poſſible commendation for his pamphlet; but I conſider this, that were it not for the anomalous aſpects it exhibits, it contains nothing which was not known before, and therefore, *without*

But why may not cow-pox be ſimilar to ſmall-pox? Why may it not produce eruptions? It cannot be ſo; becauſe, if it did, it would at all times have ſimilar properties; *e. g.* that of communicating infection by effluvia, which it has not. At leaſt, it would be ridiculous to infer, that it *acquires* this property—by what? by *appearing* in the form of eruptions! I do not proceed with this *reductio ad absurdum*.

I have mentioned virulence in cow-pox. Owing to the neglect of advice, my own child had it exceedingly ſevere. All the conſequence, however, was, not *contagion by effluvia*, not *variolous eruptions*, not *convulſions*, not one *Woodvilleian* appearance, but laſſitude, the gradual decay of old puſtules, and the emiſſion of new ones, around the inoculated part. All this, which I underſtand by Dr. Jenner's publications, is ſecondary diſeaſe, was plainly local; and was cured by me in leſs than a week, by a few drops of diluted vitriolic acid, applied with the end of a feather upon the puſtules, in the rudeſt manner. I am,

GENTLEMEN,

Your moſt obedient ſervant,

Horsley, Gloucestershire, Feb. 11, 1800.

T. D. FOSBROOKE, M.A. F.A.S.

General Remarks on Aliments produced by the different Claſſes on the Animal Kingdom, and their Influence on the Human Body. By J. J. VIREY, *&c.*

(Concluded from our laſt Number, pp. 153—156.)

THE more we retreat from perfect animals, the nearer we approach thoſe which reſpire imperfectly, and from which we obtain coarſe and even dangerous aliment: thus we obſerve, that when an animal reſpires freely, it affords us a more nutritious albumen and jelly; we can in ſome degree aſcertain this nutritive property, and its reſpective ſalubrity, by the organs of reſpiration, and by thoſe of the circulation, which depend on the former. Hence the animals which are deprived

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without thoſe anomalous aſpects, would not be worthy of publication. And after all, the whole of its credit is equivocal. The public will at leaſt concede, that if with experience equally extenſive, we ſtill find the reſults the ſame as originally ſtated, we have no right to reſign thoſe original pretenſions.

of these organs, are to us actual poisons; and in proportion as we ascend in the scale of animal composition, these poisons diminish, and nutriment increases. We do not meet with any poisonous quality in a natural state in the flesh of such animals as have perfect organs of respiration, together with red and hot blood.*

If an ancient writer supposed that the affections of the human heart could be changed by aliment, it might also be possible to determine this influence on the physical state of nations, with still greater ease than their moral state, which in a manner depends on the former. This field of knowledge being yet unexplored and neglected by travellers and naturalists, cannot here be sketched without difficulty; it would not even form a subject of inquiry, if man was not naturally omnivorous. But let us content ourselves with forming the contrast between the two extremes, which also depend much on the nature of the country inhabited by man.

All the inhabitants of the hot and of the equatorial countries ought to be more herbaceous, and those of the polar climates should be more carnivorous; this may be easily accounted for. The carnivorous man would die under the line, by too great a quantity of nourishing aliment,† and the reverse would cause the death of the phytophagyan under the pole. In the intermediate space, we meet with others who intermix vegetable aliment with the flesh of animals, according to the degrees of latitude in which they live. Vegetable food produces in the inhabitants near the equator a pusillanimous, irritable, feeble, mild, tranquil, speculative, superstitious, avaricious, and careless state of mind. All their energy is centered in the pleasures of love, and the delusions of imagination. The carnivorous, robust, and ferocious inhabitant of the polar regions, on the contrary, is brutal, without moderation or religion, courageous even to rashness; free, sprightly, and inconstant, his judgment is as dull‡ as his senses are coarse;

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* The venom which proceeds from the bite of serpents, is only a sort of very powerful digestive liquor, forming their gastric juice, and the action of which is slow. Several animal humours may degenerate and become venomous by the passions and by diseases; a circumstance which apparently indicates a sort of vitality.

† The inflammatory disease to which all Europeans are subject who go to the Indies, arises from no other cause. It partly reduces their plethoric state, which is so necessary in cold climates.

‡ Cit. Virey appears, in this instance, to display the fondness for *generalizing* superficial observations, and that propensity for drawing hasty conclusions, which in a peculiar manner characterizes the bulk of his countrymen.

When

coarſe; in him every thing expreſſes durability; his energy is a kind of furor; and his voluptuouſneſs, exceſs. The former is expoſed to the moſt abject ſlavery, the latter becomes a moſt intolerable tyrant. If both are conſidered in a political point of view, what an immenſe ſcene is open for our inveſtigation! How can all this be deſcribed? What an immenſe detail, eſpecially when in this inquiry, thoſe nations be included which fill the intermediate ſpace between thoſe extremes. The immortal Monteſquieu has well conceived it. I here lay down my pen.

> Non mihi, ſi linguæ centum ſint, oraque centum,
> Ferra vox. VIRGIL, ÆNIED. vi.

Let us only examine ſome differences reſulting from the uſe of each claſs of animals. Though there are no nations who confine themſelves to one particular kind of food, nevertheleſs the natural production of the country may oblige them principally to ſubſiſt upon it.

The nations who live on the fleſh of quadrupeds, and even on that of birds, are thoſe in particular who inhabit the northern countries of Europe,—ſuch as the Swedes, the Danes, the Ruſſians, the Germans, and the Engliſh; and in northern Aſia, the greater part of the hordes of Tartars and Kalmucs. Their behaviour exhibits a certain roughneſs or haughtineſs, an energy, and even firmneſs of mind, more or leſs characteriſtic. This ſort of firmneſs frequently changes, even into an invincible obſtinacy among the nations ſubſiſting by the chace, and the ſavages of North America. The diſeaſes of theſe nations, eſpecially, are of a plethoric and inflammatory nature, and depend chiefly on the ſanguiferous ſyſtem.

There are only a few miſerable individuals on earth, who are contented with feeding on reptiles; but as they do not confine themſelves to theſe alone, we can form no certain concluſions. It has, however, been remarked, that they are ſubject to cutaneous herpetic affections, and ſometimes even to gonorrhœa, or rather to habitual blennorrhagias. All this is obſervable in a greater or leſs degree among the black inhabitants of Thebes, of the mountains of Paleſtine among the wretched Cophtes, the Druſes, &c.

When attributing this unfavourable character to the northern nations, he ſeems to have forgotten that they have produced a modern Semiramis: that their merchants and political ſpeculators far excel in cunning and intrigue the revolutionary heroes of the ſouth; and that they alſo boaſt of philoſophers of the firſt eminence.

The Ichthyophagous nations are very numerous, and cover the sea shores in multitudes, so that they would soon destroy the fish, if their fecundity was not inexhaustible. They contract, it may be said, the nature of palmipedous birds, who enjoy the same kind of life as themselves; they are very voracious and for this reason are very prolific. They are intrepid sailors, but pusillanimous soldiers; they are also gross, barbarous, and stupid. Their diseases, which are chiefly endemic, attack the lymphatic system, and the organ of the skin. The latter affections act as a considerable stimulus on the parts of generation; and this, united to the abundance of food, must considerably increase population.

With respect to the Entomophagous hordes, their disposition appears as weak and contracted as their food is wretched; they are, and always will remain, stupid and barbarous. This stimulating and acrid aliment, renders them thin and dry; the diseases incident to them, attack the organs of contractility, and produce many spasmodic affections. It is asserted, that they are subject to phthiriasis; in other respects, these nations which chiefly exist in Africa, are not satisfied with insects alone, and the drying heat of the climate has also a powerful influence on their constitutions.

It is difficult to compute those scattered tribes, who procure with great efforts a pitiful subsistance on the sandy shores, by searching for shell-fish.

Of this description are some of the inhabitants of the isles in the South Sea, and in New Guinea; they are weak, timid, and perfectly stupid. They are also treacherous; for as they cannot drive away by main force the strangers who famish them by visiting their islands, they endeavour to attain their aim by stratagem.

There are not a sufficient number of observations made on their physical condition, to enable us to draw any practical result.

It is worthy of notice, that all the maladies which arise from the nature of their food, extend their action particularly to the skin; a circumstance which proves the strong sympathy by which it is connected with the intestinal canal.

All that I have said respecting animal food, as used by various nations, can only be considered as an attempt towards an analysis of this interesting subject, which still remains so obscure and thorny, that it is dificult as first to discover the true path.

However, there can be no very great deviation, while we remain at the vestibule of useful inquiry. We are not yet enabled to take a comprehensive and satisfactory view of the whole

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as the present sources of information on this subject are united in many respects to Natural History, Physics, Medicine, and Ethics.

Observations on a Case of Paralysis of the Extensor Muscles of the Hand and Fingers, accompanied with a Separation of the Bones of the Metacarpus: by Cit. BOURGEUT, Physician at Bagnières.

[Extracted from the Recueil Periodique, No. XXXIV.]

CORN. ———, an inhabitant of Madrid, came to Bagnières afflicted with the following disease: He could not hold up nor extend his hands, but they continually hung down as if deprived of animation. His fingers were paralytic, but his thumbs were not affected; he could extend the former but not bend them; the lower parts of his arms were in a state of atrophy, their external surface was particularly flabby; the thenar eminence of each hand was in a similar state, and the patient was very unhappy.

The cause of this disease was attributed to the venereal virus, and under this idea the patient had submitted a long time to various modes of treatment; but, whenever he experienced any relief, it was from the use of the tonic baths of the place in which I reside. His disease returning in the present year, (the 5th of the Repullic) he resorted to Bagnières, and took the waters without the least effect: he then consulted me; but not being satisfied with the statement of the case, I examined him more attentively, and found the extensor muscles of his wrists and fingers in a paralytic state; the epidermis cold and almost insensible; the extensor muscles of the thumbs alone retained their energy. The joints of the wrists and fingers were always contracted, and those of the thumbs very weak, so that the paralytic yielding to the efforts of the sound parts, the hands remained constantly bent, and great exertion was necessary to extend them. All the bones of the wrist were separated. Between the articulations was a discharge of thick synovia; the soaked ligaments had lost their tone, and those bones could be moved separately without occasioning pain. The sheaths of the tendons were likewise soaked with synovia; the cellular membrane was relaxed and tumefied, so that the hands were larger and heavier than in their natural state. Having well considered these circumstances, I could not ascribe

them

them to the exiſtence of a venereal virus; beſides which, I was too well aware of the effects of mercury on the minor articulations, to apply that medicine. I conſequently purſued the following mode of treatment: I firſt applied to the diſeaſed part a proper bandage, provided with ſheaths, to relieve the extenſor muſcles from the twitching to which they were ſubject, to aid the re-abſorption of the ejected fluids, and to promote the approximation of the bones of the carpus. During this time, aromatic, ſpirituous, and ſtimulant fumigations, applied to the extenſors alone, and frictions of the ſame kind, in a ſmall degree reduced them towards their natural ſtate. I then directed, round the metacarpus, a plaſter of gum ammoniac diſſolved in vinegar of ſquills; I ſeconded the effect which it produced, by the uſe of tonic fomentations, always applied to the extenſors. I ſoon had the pleaſure of obſerving muſcular motion re-appear; the bones of the metacarpus united, and the articulation become more firm. I left off the rolled bandage, and made two leather gauntlets ſtrengthened with ſmall pieces of whalebone, to relieve the wriſts. I continued to employ diſſolvent and tonic remedies, and ordered the patient to drink of the warm diuretic waters of Barèges. He ſoon after departed for Paris. I adviſed him to make trial, as he paſſed, of the mineral waters of Dax. On his arrival at Paris, he procured, according to the plan I had given him, a ſilver inſtrument, which anſwered the purpoſe I expected from the uſe of the leather gauntlet. Some time after he returned to Bagnières, having now the uſe of his hands and wriſts, without the aid of any inſtrument; and at length he was perfectly cured.

Reflections on the preceding Obſervations:
By Cit. Botentuit.

Although the author may have followed ſuch indications as naturally occurred in the treatment of this diſeaſe, the ſucceſsful termination of which appears to be chiefly owing to the means employed, his ſtatement preſents details which have ſuggeſted to me the following reflections:

Firſt, he ſtates that he endeavoured to direct the action of aromatic fumigations on the extenſors alone.—But could he prevent their action from being communicated to the other muſcles? This appears to me to be problematical; conſidering the form of the medicine. We are indebted to Mr. Winſlow for an obſervation, in which the joint application of emollients and tonics relieved the antagoniſt muſcles, ſome of them being contracted

contracted, and others relaxed; but the action of theſe medicaments being directed to both ſides of the neck, their ſeparate application became more eaſy. Beſides, Cit. Bourguet had nothing to fear from the action of tonics on the flexors, which were not diſeaſed, and which only kept the fingers bent, becauſe their antagoniſts could not counter-balance their operation.

In applying a rolled bandage and ſheaths, the author ſays it was his intention to relieve the extenſor mucles from the conſtinant twitchings; but will the permanent contraction of a muſcle cauſe its antagoniſt to experience a twitching, particularly when the latter is paralytic? When a muſcle does not contract, is it not in a ſtate of relaxation? And can it be ſaid in the preſent caſe, let it ſhoot, as long as the fibres are not carried beyond the point to which they uſually extend? It appears to me, that if the ſheaths could then be uſeful, it was by preventing the joints from becoming gradually accuſtomed to their ſtate of contraction, ſo as to admit no longer of the extenſion of the fingers.

The ſecond intention of the author in the application of the bandage, was, he ſays, to favour the re-abſorption of the ejected fluids.

I doubt whether he has been able to obtain this advantage. I am well aware that a tight bandage, and a ſkin prepared and laced on an extremity of the body, may reſtore its elaſticity, as well as that of the cellular texture, by oppoſing in the firſt place the humours in one part, diſperſing the tumefactions, &c. but, in the preſent caſe, where the thick ſynovia, according to Cit. Bourguet, occurred between the bones of the metacarpus, it appears to me that the remedies applied could not produce the deſired effect. In ſhort, I ſubmit my ideas to the deciſion of the Society; as I have not had an opportunity of ſeeing caſes analogous to that which forms the ſubject of this paper; but I have met with two where the fingers were bent in a ſimilar manner, not by a palſy of the extenſors, but by the contraction of the flexor muſcles.

A young man, about twenty years of age, wounded himſelf in the hand with a ſpit, (I do not know how deep) with which he was about to ſpit a fowl. He experienced very little pain, no ſymptoms occurred, and the wound was cured in a few days; but the fingers became bent by degrees, the hand totally cloſed, and every time he attempted to open it the pain became ſo acute, that the patient was deprived of his ſenſes. Emollients of every kind, and in every poſſible form, were applied for a conſiderable length of time, and the cure was effected at the end of ſix months only.

A child, ten years of age, was thrown down in the ſtreet, and

and fell upon its open hand; the pain was but slight, and he passed the night quietly; but the next morning the fingers were entirely contracted. They could not be extended without force, and the child expressed great pain by his cries. Emollients in the form of baths, affusions, and fomentations, were applied, but without effect. I attempted, like Cit. Bourguet, to keep the fingers extended with sheaths, which caused much pain; and as soon as they were laid aside, the fingers again became contracted. I then resorted to my former methods, but with no better success. I tried to make alternate motions of flexion and extension, which were continued for several minutes, notwithstanding the cries of the child. After an intermission of a few seconds, I again moved the fingers, and observed that they became gradually less sensible of pain. The child's mother continued these motions during the day; and two days afterwards, the little patient recovered the perfect use of his fingers.

I have frequently seen, after fractures near the articulations, and even after reduced luxations, all the muscles of the wounded extremity in a semi-paralytic state. I have often succeeded by the means before mentioned, but not without inducing great weakness, which remained in those parts for a considerable time. Too often, also, the patient continued lame, notwithstanding all the aid of art. I have several times advised persons afflicted with such complaints, to resort to the mineral springs, as their last resource; and particularly with the hope that Time and Nature would accomplish the cure.

A Concise History of Principal Discoveries in Anatomy.

[Cotinued from our last Number, pp. 156—161.]

§. 32. THE knowledge of the structure of the brain, and the distribution of the nerves to different parts of the body, was considerably improved during the sixteenth century; although the doctrine of their functions still favoured of the old Galienian Theory. Thus, the *spiritus animales* originated in the ventricles of the brain; and thus the blood, mixed with the vital fluid, was evacuated from the arteries through the tortuous windings of the brain into those ventricles, in order that the animal spirits might thence be secreted. This was the

doctrine

doctrine of BERENGAR,* as well as that of most physiologists of his time. It is likewise remarkable, that the superficial parts of the brain were understood only at a very late period; while the parts situated below the basis of the ventricles, were more minutely examined. The reason of this apparent inconsistency is probably to be found in the less striking appearance of the former, as well as in the commonly received opinion, that the ventricles constituted the principal parts of the brain, and consequently ought to be first examined. BERENGAR had the knowledge of four ventricles, and described at the base of the two first, or the lateral ventricles, the *plexus choroideus*, by the appellation of vermiform processes, together with the substance formed of arterial and venous vessels;† he represented the canal which connects the fourth ventricle in the medulla oblongata with the lateral ventricles,‡ the *eminentiæ candicantes*, behind the thalami nervorum opticorum, on the base of the cranium, and likewise the pineal gland.§ The abovementioned canal in the substance of the corpora quadrigemina was, however, denominated *aquæductus Sylvii*, in commemoration of that author, who first distinctly described it.‖ Subsequent to SYLVIUS, VESALIUS gave an accurate account of this canal, which was by him called an aqueduct.¶ He besides observed two lamellæ in the dura mater, which had been previously discovered by MASSA.** He was acquainted with the cineritious cortical substance, which he distinguished from the medullary;†† he also described the *ventriculus tricornis* with more exactness than his predecessors, and refuted the prevailing opinion, that the sense of smelling was situated in its anterior cornua. He farther proved that the ventricles were not furnished internally with any peculiar membrane, and endeavoured to explain that their use consisted merely in preserving and supporting the animal spirits. He lastly described the choroid plexus, at the base of the ventricles, where he discovered two new parts, the *septum lucidum* and the *fornix*.‡‡

SERVETUS, in his work before quoted, applied the discoveries of VESALIUS to establish his hypothesis of the animal functions: he believed that the plexus choroideus served for secerning the animal spirits;§§ but that the real seat of the soul was situated in the aqueduct discovered by SYLVIUS;‖‖ the

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* Commentar. in *Mundin.* f. 431. a.
‡ *Ib.* f. 442.
‖ Dissect. 4. p 310.
** Introduct. f. 83. b.
†† Lib. vii. c. 7. p. 547.
‡‡ *Ib.* p. 175.
† Comment. in Mundin. f. 437. a.
§ *Ib.* f. 437. a. 442. a.
¶ Lib. vii. c. 6. p. 546.
†† Lib. vii. c. 4. p. 541.
§§ *(Servet.)* restitut. christian. lib. v. p. 171.

two anterior ventricles represented the images of exterior objects; the third was the seat of thought, and the fourth that of memory.*

§ 33. In the tables of EUSTACHIUS, there occurs a very good figure of the *basis cerebri*, and some other representations of the interior parts of the brain,† which do credit to those times.

ARANZI discovered, soon after EUSTACHIUS, the *pedes hippocampi*, at the sides of the posterior parts of the *corpus callosum*,‡ and described also the fourth ventricle, by the name of *cisterna cerebelli*,§ as his own discovery. VAROLI represented, with more precision than any of his predecessors, the *commissura anterior et posterior*, the *crura medullæ oblongatæ*, ‖ the bridge of his denomination, ¶ and the choroid plexus of the brain, as consisting of a glandular substance:** he, however, did not clearly comprehend the connection of the fourth with the first ventricle.†† At length, PICCOLHUOMINI distinguished, in the most accurate manner, next to VESALIUS, the cineritious cortical from the medullary substance of the brain.‡‡

With respect to the medulla spinalis, ACHILLINI was not ignorant that its substance terminated in the region of the loins;§§ but BERENGAR more exactly described its termination towards the twelfth vertebra of the back, in a small oval plexus.¶¶ STEPHANUS*** and PICCOLHUOMINI††† inform us, that a cavity is sometimes observed in the spinal marrow, replete with a yellow substance; an observation which is confirmed by a celebrated modern anatomist.‡‡‡

BAUHINUS appears to have been acquainted with the *ligamentum seratum*, which connects the pia with the dura mater of the spinal marrow.§§§

§ 34. With the exception of the followers of ARISTOTLE, and especially of CÆSALPINUS, all other authors of this century derived the nerves from the brain. But CÆSALPINUS spared no pains in supporting the hypothesis of ARISTOTLE, that the heart was the origin of the nerves, by asserting, that in the living body there could be but one principal part, and one

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* *(Servet.)* restitut. christian. lib. v. p. 177.
† Tab. xvii. xviii.
§ *Ib.* c. 7. p. 48.
¶ *Ib.* f. 4 a.
†† *Ib.* f. 6. b.
§§ Annotat. in Mundin. p. 45.
¶¶ *Stephan.* de dissect. p. 337.
††† *Morgagni* adversar. anatom. vi. animadv. 14 p. 17. 18.
‡‡‡ Theatr. lib. iii. tab. xv. fig. 1.—Compare *Haller.* element. physiol. vol. iv. p. 86.
‡ Obs. c. 1. p. 43.
‖ De nerv. opt. f. 3. b.
** *Ib.* f. 8. a.
†† Anatom. praelect. p. 252.
‡‡ Comment. in Mundin. f. 496. b.
*** Anatom. praelect. p. 260.

one reſidence of the mind, there being but one ſoul. As the heart is the firſt viſible object in the punctum ſaliens of the fecundated egg, it muſt alſo be the pre-eminent part of the body, and the only reſidence of the ſoul; and, if this be admitted, the heart muſt conſequently be the ſenſorium commune, and likewiſe the origin of the nerves, as is evident from the effect of the paſſions on the heart. And although ocular inſpection, as well as daily experience, ſufficiently evince that the nervous influence originates in the brain, yet CÆSALPINUS, in admitting the theory of ARISTOTLE, defended himſelf by aſſerting, that the arteries originally tranſmitted the nervous energy from the heart to the brain, and were already furniſhed with nervous membranes, their cavities collapſing within the brain, and the membranes attenuating into filaments, where they change into nerves.* Few anatomiſts of that age coincided in opinion with CÆSALPINUS; nevertheleſs, the obſervations made on the inſenſibility of the cortical ſubſtance, ſeemed in ſome reſpect to favour his conjecture.† With a view to invalidate this atteſted fact, VAROLI objected, though not in a ſatisfactory manner, that the brain being the ſeat of all the organs of ſenſe, cannot manifeſt a greater ſuſceptibility of feeling for the one than for the other organ of ſenſation.‡

The opinions concerning the origin of the nerves from the *cerebellum*, were ſtill more divided. GALEN had maintained, that the nerves of a harder conſiſtence originated from the cerebellum but BERENGAR aſſerted the contrary, and alledged a number of experiments purpoſely inſtituted, by which he was convinced that the cerebellum emitted no nerves whatever, but all, without exception, owed their origin to the cerebrum, or the medulla oblongata.§ COLUMBUS alſo ſeriouſly maintained this opinion;‖ but VAROLI proved that the medullary proceſſes of the cerebellum contributed to form the ſpinal marrow, and that the auditory nerves were emitted from the pores Varolii, or from the medullary nodus itſelf, as this is an important part of the cerebellum.¶ This ſubject is now leſs contended, and the acouſtic nerve is generally ſuppoſed to ariſe from the corpora pyramidalia; yet the facial, as well as the fifth and ſixth pair of nerves, generally originate either from the pores Varolii, or the nodus medullaris. The old prejudice, that the nerves originated partly from the *meninges cerebri*, or, at leaſt, that all the nerves were ſurrounded with the two membranes

* *Cæſalpin.* quaeſt. peripatet. lib. v. c. 3 p. 514. f.
† *Laurent.* hiſt. anatom. lib. x. quaeſt. 9. p. 857.
‡ *Varol.* anatom. lib. i. c. 3. p. 6. § Comment. in Mundin f. 434. a.
‖ Lib. viii. c. p. 356. ¶ *Varol.* de nerv opt. f. 3. b.

of the brain, was first corrected by FALLOPIUS, who demonstrated that the optic nerve alone was covered by the dura mater.* The distinction between sensorial and motorial nerves,† the consequence of this hypothesis, was, on more accurate examination, found to be erroneous. DU LAURENS evinced that the par vagum, (which he denominated the sixth pair) served the purposes both of sensation and motion, and that all the soft nerves did not produce sensation, nor all the hard ones motion.‡ STEPHANUS, however, believed that the nerves proceeding to the muscles were provided with a firm coat, and that they changed their consistence from a medullary to a membranous form.§

FALLOPIUS justly remarked, that the division of nerves into pairs, according to the foramina existing in the cranium, was improper, because two or more nerves of a distinct origin frequently pass through the same foramen.‖ He also was the first, since the time of GALEN, who discovered the *ganglia* of the nerves. On describing the sixth pair, (according to our division, the tenth, or par vagum) he also mentions the superior of corpus olivare, formed of the intercostal and the first cervical nerve.¶ FALLOPIUS supposed that this ganglion belonged to the par vagum, because, in his opinion, the intercostal nerve originated from the par vagum; and indeed, this ganglion often receives branches from the tenth pair.**

§ 35. We shall now treat upon the individual nerves, in order to ascertain the relative degree of knowledge possessed by the anatomists of that century, with regard to the distinction of the nerves. In the description of the first pair, or the olfactory nerve, there remains but little to add to the history already given by the worthy and celebrated METZGER.†† It is evident that anatomists were altogether unacquainted with the olfactory nerve, at the commencement of the sixteenth century; they merely treated of mammillary processes of the brain, or papillæ too soft and tender to be registered among the nerves, and the use of which was to secrete the viscid humours from the cerebral ventricles, and receive the odorous effluvia. Such was the description of ZERBIUS,‡‡ who thus gave a farther proof that he

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* *Fallop.* obs. p. 402.

† Compare *Prof. Sprengel's History of Medicine*, Vol. I. p. 385.

‡ *Laurent* hist. anat. lib. iv. quæst. 10. p. 292.

§ *Stephan.* de dissect. p. 90. ‖ *Fallop.* obs. p. 403.

¶ *Ib.* p. 407.

** *Neubauer* de nerv. cardiac. tab. iii. fig. 1. nr. 11.

†† *Metzger* primi paris nervorum historia in *Ej.* opusc. anat. et physiolog. 8. Goth. et Amsteld. 1790. and in *Ludwig* script. nevrolog. minor. vol. i. p. 108. f.

‡‡ *Zerb.* anatom. lib. iv. p. 123. 124.

he did not conſider theſe parts as nerves. ſince he begun the enumeration of the particular nerves from the optic. PORTAL* and HALLER † are therefore wrong in ſtating, that ZERBIUS already knew the olfactory nerve. ACHILLINI, to whom METZGER had no acceſs, ſpeaks evidently of the diſtribution of the olfactory nerve to the noſe, and of its progreſs under the papillæ, from which he conſequently diſtinguiſhes the nerve itſelf. He complains, however, that he has frequently been unable to find this nerve, ‡ which SOEMMERING juſtly aſcribes to its ſudden putrefaction as it is very tender, and only diſcernible in freſh ſubjects. § Should therefore ACHILLINI not be regarded as the *diſcoverer of the olfactory nerve?* When SOEMMERING and METZGER ſhall have read ACHILLINI, it is to be hoped they will anſwer this queſtion in the affirmative. BERENGAR, ‖ on the contrary, and WINTHER VON ANDERNACH, ¶ knew no more, than that theſe papillary proceſſes, though real organs of ſcent, were no nerves; that they terminated in the os cribriforme, and admitted through its holes, a liquor, ſecreted into the noſe. Even MASSA treated on the origin of this nerve with no ſmall ingenuity; he attributed to it all the properties of a nerve, deſcribed its extenſion to the olfactory membrane, and denominated it the firſt pair.** And though aided by ſuch a predeceſſor, VESALIUS adopted the deſcription of what the ancient authors called papillæ; contending, that the proceſſes of theſe parts did not extend beyond the brain, and thus excluding them from the liſt of the nerves.†† He obſerved, however, the ſubtile, dewy liquor, ſecreted in young perſons from the tender coat of the olfactory nerve, collateral to the criſta galli.‡‡ INGRASSIAS traced this nerve, through the foramina cribroſa, but does not mention its further extenſion to the membrana Schneideriana§§. Nor did COLUMBUS, ‖‖ FALLOPIUS, ¶¶ and STEPHANUS, make much greater progreſs, the laſt of whom mentions ſome canais or pores diſcovered by him, in the year 1545.***

[To be continued in our next Number.]

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* Hiſt. de l'anatom. vol. 1. p. 253.
† Element. Phyſiol. vol. iv. p. 205.
‡ Annot. in Mundin. p14. f.
§ De baſi encephali, lib. iii. ſ. 1. ſect. 23.
‖ Comment. in Mundin. f, 450. a. b.
¶ Inſtit. Anatom. p. 116.
** Introduct. f. 87.—Epiſt. medic. 6. f. 58. b.
†† Lib. iv. c. 3. p. 564. The roots of the olfactory nerve are likewiſe repreſented sn a very indifferent ſtyle. See his fig. i. f. p. 362.
‡‡ Lib. vii. c. 3. p. 539. — Compare *Pfeffinger* de ſtructor, nervor. ſect. 2. §. 3.
§§ Comment. in *Galen*. de oſſib. p. 103.
‖‖ Lib, viii. c. 2. p. 358.
¶¶ *Fallop*. obſ. p. 402.
*** *Stephan*. de diſſect. p. 255.

HINTS

HINTS AND IMPROVEMENTS

IN THE PRACTICE OF

MEDICINE, SURGERY, AND PHARMACY.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

SHOULD the following notice to the Faculty appear worthy a place in your useful Journal, I should esteem myself obliged by its insertion.

I have the honour to remain,
GENTLEMEN,
Your obedient servant,
E. KENTISH, Surgeon.

Newcastle upon Tyne,
January, 1800.

To all Medical Practitioners, who have had an Opportunity of observing the diseased Actions arising from the Application of heated Substances to the living Body, commonly termed Burns, or Scalds.

AS I have had several communications from my professional brethren since the publication of my Essay on the above subject, I wish to offer to the whole, an opportunity of recording their observations. To those who have aided the investigation, I thus publicly return my sincere thanks, and particularly to the philosophic author of Medicina Nautica. It gives me pleasure to report, that the faculty of this neighbourhood (for the most part) have adopted the practice recommended; and their opinion of its efficacy is not less flattering to me than the avowal of it is creditable to themselves. Mr. S. Hammick, jun. of the Royal Naval Hospital at Plymouth, has favoured me with his opinion of its superior merit to every other means used in that extensive institution, where he has an ample field for experiment, from the frequent explosions of gunpowder on board his Majesty's ships. He says, "I am decidedly of opinion that the practice of applying immediately to burns the spirit

ſpirit of turpentine, is the beſt I have ever yet ſeen adopted, as the proceſs to ſuppuration is, in general, more rapid, and thoſe irregular marks, or ſeams, found after other applications, are not to be met with after the turpenting; neither is the ſkin ſo diſpoſed to crack, or break open again, as was formerly too often the caſe, producing the moſt troubleſome and irritable ſores." The leading features I would wiſh to point out, as forming the baſis of compariſon are, 1ſt. The length of period from the accident to an unequivocal ſuppuration, (*i. e.* in burns of ſimilar parts and extent); this will form a pretty exact criterion of the propriety of the treatment during the firſt ſtage. 2dly. From the point of the ſuppuration to the cure, which will enable us to judge of the treatment of the ſecond ſtage. The above are the two leading points; and, if the ſymptoms in the two ſtages are accurately marked, may include the whole treatment. But whatever obſervations I may be favoured with, I promiſe to record them, whether for or againſt the practice, as I diſclaim all ſelfiſh views, in a matter of ſuch importance. Thoſe who favour me with their communications, will addreſs them to Mr. KENTISH, Surgeon, *Newcaſtle upon Tyne.*

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

A Very frequent and common objection made by patients to take medicines containing ſpermaceti, is, that in the uſual way of preparing them, the mixture is not ſmooth and uniform, but lumps of the ſpermaceti ſwim on the ſurface. To remedy this inconvenience, I was induced to try whether it would not mix better if the ſpermaceti was firſt melted, and poured into a mortar, (which ſhould be previouſly warmed,) then a ſufficient quantity of the yolk of eggs to be added, and afterwards the water in the uſual way. This I found to ſucceed perfectly in forming a ſmooth and uniform mixture, without any of the inconveniences above alluded to, and taking up much leſs time than the uſual method of preparing it. By making the above known through the medium of your publication, you will much oblige,

Your humble ſervant,
CHARLES MANSFIELD CLARKE.

Carey-ſtreet,
February 5, 1800.

On

On the Medicinal Effects of the Salt of Tartar, in Puerperal Fevers, &c.

[Continued from our last Number, pp. 165—167.]

Observation I.

THE female Cit. Lecourneur, aged 24, having been delivered five days, and made unsuccessful attempts to suckle her child, was so much afflicted that she became extremely indisposed. Cit. Guinot found her pulse contracted, hard, and very frequent. Her breasts were flaccid; the hypogastric region was inflated, and the whole abdomen painful. The lochia ceased; the patient complained of a temporary blindness, was quite deaf, and became subject to violent and continual delirium. Cit. Guinot applied leeches to the vagina, and prescribed fifteen grains of the carbonat of potass, in a potion of four ounces of lily-flower water, with an ounce of syrup of orange-flowers, a spoonful to be taken every hour; during a temporary remission, he applied blisters to her legs. The lochia again appeared: the symptoms diminished by degrees; the patient continued the carbonat of potass for three weeks; she was then purged, and the cure was completed.

Observation II.

On the 9th Ventose, sixth year, the female Citizen Rebours, thirty years of age, of a bilious, vigorous, and irritable temperament, had a very difficult parturition, which, after two days painful labour, terminated by the aid of the forceps. Shortly after, she experienced very acute pains in the abdomen, accompanied by a severe, dry, and frequent cough. At length, a fever intervened, the pulse became hard and bound, and the lochia almost entirely ceased. Diluents and composing remedies were employed without success. About the fourth day, a slight swelling of the breast afforded some hopes of relief, but the milk soon disappeared; the breasts were flaccid, the lochia suppressed, the abdomen, and particularly the hypogastric region, considerably tumefied, her sufferings became more distressing, her cough more obstinate, and the patient was attacked with delirium. On the sixth day a miliary eruption appeared with spots of a red-violet colour. At this period, Cit. Guiton had recourse to anti-lacteal remedies. He prescribed fomentations, composed of a solution of soap in a decoction of poppy heads, to be applied to the abdomen; a potion of the carbonat of pot-ash, at the rate of twelve grains to a dose, to

be

be taken by a ſpoonful at a time; and an emollient clyſter to be adminiſtered morning and evening, to which was added a drachm of the carbonat of ſoda. He alſo ordered a dozen leeches to be applied to the vagina; the bleeding was abundant and apparently relieved the patient. The fever, however, increaſed, while the miliary eruption and ſpots diſappeared; they were ſucceeded by tranſparent veſicles of the ſize of a pea, ſimilar to thoſe which riſe in *pemphigus*. Theſe ſymptoms announced a great tendency to putrefaction. The alcaline treatment was conſequently ſuſpended, and the Virginian ſnake root, a potion made of bark, a light diaphoretic drink, with compoſing clyſters, and antifebrile remedies, were preſcribed. On the twelfth day, the eruptions diſappeared, leaving on the ſkin a furfuraceous duſt. The fever, delirium, and cough, as well as all the other ſymptoms, ſtill remained; but the lochia had entirely diſappeared. The former treatment was again adopted, by increaſing the quantity of the carbonat of potaſs in the draughts, and the carbonat of ſoda in the clyſters and fomentations, while the patient's diet was low. To prevent the conſequences of the ceſſation of the miliary and cryſtalline eruptions, he took the earlieſt opportunity of applying two ſmall bliſters to the legs. From the time the former treatment was adopted, the patient continued to recover; the tenſion of the abdomen, and the other ſymptoms, gradually diminiſhed; the lochia again appeared, and continued to flow; the urine and ſtools, which had hitherto been very ſparing, became more abundant, and had a proper appearance. On the twenty-ſecond day, the patient was able to take a purgative, which operated three or four times. The alcaline treatment was continued till the 20th Germinal, at which time the patient was perfectly cured.

Observation III.

The female Citizen Lepitre, about thirty years of age, tall, and of a robuſt conſtitution, who had recently been delivered of a dead child, ſent for Cit. Guinot, who found her in the moſt deplorable ſtate. The lochia had ſtopt; the breaſts were flaccid, though tumefied; the belly diſtended and painful; reſpiration very difficult; the voice hoarſe; the ſpeach haſty; the pulſe frequent and hard; the face inflamed, and the eyes ſparkling. From the combination of theſe ſymptoms, he determined upon applying leeches to the vagina; which were attended with a favourable effect. He then preſcribed the carbonat of potaſs in a doſe of from thirty to thirty-ſix grains every day; bliſters were applied to the legs, and ſome purgatives at length terminated the diſeaſe in the ſpace of a month. Cit Devilliers aſſiſted Cit. Guinot in the treatment of this diſeaſe.

Observation IV.

On the night of the 10th of Auguſt, 1792, the female Cit. Bourrée, thirty-two years of age, of a ſtrong conſtitution, was affrighted by the *tocſin* and the *generale*, two or three days previous to her ſafe delivery of twins. Her milk diſappeared; the abdomen became inflated, and the region of the uterus was extremely painful; the lochia were ſuppreſſed, an acute fever appeared, which was attended with a ſlight delirium. Cit. Guinot, who was called in at midnight, immediately prescribed a potion compoſed of four ounces of barley water, half an ounce of orange-flower water, half an ounce of ſyrup of *karabe*, and eighteen grains of carbonat of potaſs; a ſpoonful to be taken every half hour. He ordered flannels ſoaked in hot ſoap water, to be applied to the hypogaſtric region, and preſcribed clyſters of a ſimilar ſolution. About twelve o'clock on the ſame day, the patient felt relieved; but was in great anxiety about her huſband, who was then in the action. She was delirious, and the fever ſtill remained, though the lochia in a ſlight degree returned. Leeches were now applied, and attended with conſiderable effect. Her huſband returned; the alcaline treatment was continued; her ſtate of health improved; the lochia flowed abundantly; and the patient was cured in the ſpace of a fortnight.

Observation V.

In the month of Floreal, 5th year, the female Cit. Lamarre, twenty-ſix years of age, of a middle ſtature, but very robuſt, having loſt the child ſhe ſuckled, ſuddenly experienced a violent attack. Her neck, head, and face, became ſwollen and painful; the glands of the neck and the ſurrounding cellular texture were bloated, and the patient diſcharged a milky fluid from the noſe. Theſe ſymptoms were attended with a continued and high fever. The metaſtaſis of the milk could not be prevented, and this caſe excited the attention of Cit. Guinot. The remedies he preſcribed, were clyſters rendered active by the carbonat of ſoda, in doſes of one drachm each; baths for the feet, and a draught acidulated by the addition of carbonat of potaſs. He ſoon had reaſon to be ſatisfied with this treatment: The milky diſcharge from the noſe ceaſed, and was ſucceeded by an abundant flow of the ſame nature from the vegina. All the ſymptoms now abated, and the patient, from diſguſt, left off her alcaline drink for ſeveral days, in conſequence of which the ſymptoms again returned. It was now neceſſary to repeat the carbonat of potaſs in ſtronger doſes; to apply leeches, and direct the uſe of purgatives. After this treatment had been purſued for a month, the cure was accompliſhed.

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This woman was delivered the following year at St. Germain, and returned to Paris afflicted with fever and inexpreſſible pains over the whole extent of the pelvis. After having in vain attempted all other means of relief, Cit. Guinot preſcribed alkaline fomentations to be applied to the abdomen; clyſters and injections of a ſimilar nature into the uterus, and drink acidulated with eighteen grains of carbonat of potaſs to each pint. After having purſued this treatment for one month, the patient was perfectly reſtored.

Cit. Marchais was conſulted in this caſe.

[To be concluded in our next Number.]

Pharmaceutical Processes.

Liquor Anod. Vegetabilis & Naphta Aceti.

As the acetous æther, and particularly the dulcified ſpirit of it, have been introduced into medical practice, an improved method of its preparation will not, we truſt, be unacceptable to many of our readers.

Dr. WESTENDORFF, of Gottingen,* mixed ſtrong acetous acid with alcohol, having obtained this acid by the decompoſition of the acetit of potaſs with ſulphuric acid; and thus, by means of diſtillation in the uſual manner, he prepared the anodyne liquor and the acetous æther; but afterwards the ſame articles were produced from common acetit of potaſs. A ſubſequent attempt was made to prepare the dulcified ſpirit, and the æther by a compound proceſs, or a double elective attraction; a proceſs the more advantageous, or the ſeparation of the acetic acid, and the production of the æther, and the dulcified ſpirit, could be effected by a ſingle diſtillation.

Mr. VOIGT, a German apothecary, who firſt introduced this compound proceſs, found the following method the moſt ſatisfactory. Sixteen ounces of acetit of potaſs† are put into a retort, and through a curved glaſs funnel, of ſufficient length, mixture of ten ounces of alcohol, and ſix ounces of ſulphuric acid, is gently added; the veſſels being well cemented, ten ounces of this mixture are diſtilled over a ſlow fire. By mixing the diſtilled liquor with water, in which ſome tartarit of potaſs has been diſſolved, it will be found that the greateſt part of what has paſſed over, is the moſt excellent acetous æther.

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* Diſſert. de optima acetum concentratum ejuſdemque. Naphtam conficiendi ratione. Gotringæ, 1772.

† For this purpoſe, the tartarite obtained from the acetit of lead may be employed with equal advantage.

As ſix ounces of ſulphuric acid are inſufficient to ſeparate all the acetous acid, there may ſtill be added to the remainder four ounces of ſulphuric acid and twelve ounces of alkohol, which, when diſtilled, will yield a perfectly dulcified ſpirit of vinegar. In another experiment, Mr. Voigt, from eight ounces and a half of acetit of potaſs, five ounces of ſulphuric acid, and eight ounces and a half of alcohol, obtained nine ounces and ſix drachms of æther, and eleven ounces of dulcified ſpirit of vinegar. This proceſs has alſo been confirmed by Mr. WESTRUMB, who, from four pounds of cryſtallizable acetit of potaſs, and two pounds of ſulphuric acid, obtained ſeventeen ounces of fuming acetous acid: and ſtill finding part of the ſalt undecompoſed, he poured an additional quantity of eight ounces of ſulphuric acid, and twelve ounces of alcohol, on the remainder, the diſtillation of which afforded ſeven ounces and a half of a dulcified vegetable ſpirit.

Mr. WESTRUMB, having obſerved that ſome part of the vitriolated tartar, which was produced during the operation, uniformly aſcended in the receiver, and thus frequently interrupted the diſtillation, he prevented this inconvenience by filtering the liquor, after having diſtilled over the firſt portion of the æther.

Mr. FIEDLER alſo obtained from the acetit of lead a very good acetous æther. He expoſed eight ounces of the beſt white and cryſtallized acetit of lead, in an earthen veſſel, to ſuch a degree of heat that it no longer ſwelled, when it weighed only ſix ounces and ſeven drachms. This ſugar of lead, in a dry and finely powdered ſtate, he placed into a warm tubulated retort, depoſited this in ſand, joined to it a dry and cloſely fitted receiver, and gradually poured on it a mixture of two ounces of concentrated ſulphuric acid, and three ounces of highly rectified ſpirits of wine. Having well fixed the ſtopper in the retort, he expoſed it to a moderate fire, which he increaſed towards the termination of the proceſs, in order to diſtil the whole over to dryneſs. Of this diſtilled liquor, which had a pleaſant but ſomewhat acid ſmell, two ounces and a half were again diſtilled over, in a ſmall retort, by a very gentle heat. On adding four ounces of lime-water, in which ſome alkali had been previouſly diſſolved, the liquor became turbid, and on the ſurface appeared two ounces and ſix drachms of æther, which was removed by a ſmall glaſs ſyringe, or ſyphon. To the reſiduum were added two ounces of ſpirits of wine, which by diſtillation alſo yielded a very pleaſant and ſweet vegetable ſpirit. The ſugar of lead, as well as the ſulphuric acid, not always poſſeſſing the ſame degree of ſtrength, it is neceſſary to aſcertain firſt their due proportion.

Mr.

Mr VOIGT has, for several years past, prepared an excellent vinegar, in no respect inferior to that made of wine, by exposing to a new fermentation the grains remaining from the distillation of malt spirits. From two gallons of this vinegar, he first obtained by distillation above a pint of a very strong volatile spirit, resembling the acetous æther. After distilling this spirit a second time over a gentle sand bath, he obtained a considerable quantity of good acetous æther, together with a pleasant and dulcified spirit of vinegar, of equal quality.

Although Mr. DOLLFUSS employed acetous acid, prepared from the acetit of lead, with sulphuric acid, he obtained no æther; and seems therefore, to be of Scheele's opinion, that no acetous æther can be produced without the addition of a mineral acid. This assertion, however, militates against the experiments of Mr. VOIGT, and Mr. LOWITZ*, who both obtained æther from vinegar alone. Mr. REMLER† has likewise proved the contrary by decisive experiments. On decomposing acetit of potass by sulphuric acid, and again rectifying it over acetit of lead, he obtained a perfectly pure acetous acid, which was not rendered turbid by a solution of terra ponderosa, and consequently divested of all sulphuric acid. Equal parts of such vinegar and spirits of wine yielded excellent acetous æther, and the experiments of PELLETIER tend to confirm the same fact. *Goetling's Practische Vortheile.* Ie Samml. p. 209.

Test of Arsenic being contained in Sulphur.

In order to ascertain whether sulphur contains arsenic, Dr. RICHTER recommends the following method, as being well adapted for the purpose. The sulphur ought to be first decrepitated with four or five times its weight of depurated nitre; the residuum dissolved in distilled water; and, the solution being filtered, some water saturated with sulphat of silver must be added. If arsenic should be combined with the sulphur, a browniſh red precipitate will be formed, which is properly arsenicat of silver. *Berlin. Jahrbuch der Pharmacie*, 1799. p. 119.

Method of preparing Æthiops Mineral.

To obtain Æthiops mineral in the most advantageous manner, M. DE ROOVER repeatedly affused fresh water on iron filings, either in a fresh or oxydated state, delaying every sudcessive affusion till the preceding had been entirely absorbed; the

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* *Chemische Annalen*, B. I. p. 307.
† *Taschenbuch fur Scheidekunstler*, 1787, p. 165.

the whole was then decanted, minutely triturated with the addition of water, and the fine black precipitate which is thus obtained in conſiderable quantity, was afterwards ſeparated from the water, and dried. This precipitate is of a velvet black colour, and poſſeſſes all the properties of the fineſt Æthiops mineral. *Ibid.* p. 120.

Medicinal Phoſphorus.

With a view of adapting phoſphorus to medical uſe, Cit. LEROI propoſes to melt it in hot water; to reduce it to a powder by conſtantly ſhaking it till its ſolidity be reſtored; and to triturate this powder, after diveſting it of humidity, with the addition of oil and ſugar, or the yolk of an egg. *Ibid.* p. 121.

Mercurial Soap.

M. MUSSIN PUSHKIN has contrived the following method of producing a mercurial ſoap perfectly ſoluble. He firſt diſſolves ſoap in ſoft water, and combines this with a neutral ſolution of mercury, made in the nitrous acid: the precipitate thus formed muſt be properly edulcorated, and afterwards mixed with two or three parts of cauſtic ammonia. By this combination, the mercurial ſoap is rendered completely ſoluble in water. *Ibid.*

Miſcellaneous Intelligence.

The government of Sweden has probably had more reaſon than any other, to fix its attention on the uſe of coffee. This beverage is now almoſt generally uſed in that country, and will probably become ſtill more general, while it is expenſive in Sweden, as that country is one of the remoteſt countries from the climates where it is produced, and poſſeſſes no colonies which could furniſh her with that article.

Several years ſince, a decree was proclaimed, forbidding the uſe of this favourite decoction; a law which, as might be expected, did not long maintain its effect, ſo that a renewal of it became neceſſary. In the mean time, a Mr. CAVENDER publiſhed an account of a ſubſtitute for coffee, compoſed of the flower of rye, and yellow Engliſh potatoes, which are much ſweeter than any other ſort. Theſe ingredients are firſt boiled, then made into a kind of cake, which is dried in an oven, and afterwards reduced to a powder reſembling ground coffee. The Inventor has procured a certificate from the Royal Medical College at Stockholm, ſtating, that this beverage

verage is very ſimilar to coffee in its taſte, as well as in other properties, and that its compoſition is not in the leaſt detrimental to health.

From a number of experiments made on this ſubject, in ſeveral countries, and almoſt every where without ſucceſs, it is matter of regret that we are obliged to doubt the good reception of this factitious coffee in Sweden; though ſeveral merchants who deal in it, have lately publiſhed their addreſſes to the public. It would, perhaps, be leſs difficult to make the Swedes abandon the uſe of wine, than of *real* coffee. In the cold climates, the inhabitants may eaſily ſupply the want of wine, by ſtrong beer, and other liquors; while coffee, which is more requiſite than in hot climates, cannot be effectually replaced by any other ſubſtitute. *Le Nord Literaire*, No. 8 p. 366.

Dr. G. H. PIEPENBRING, a phyſician in Hanover, has lately publiſhed a pamphlet, in which he eſpecially recommends the well known root of ſcarcity, or *beta cicla*, and ſeveral other ſpecies of the beta, as excellent *ſubſtitute for coffee*; in the ſame treatiſe he propoſes the leaves of the raſpberry, or the *rubus idæus*, L. inſtead of the more expenſive and leſs wholeſome tea-leaves; and gives particular directions for preparing both his native tea as well as coffee. This attempt at ſupplanting exotic drugs by indigenious productions, is the more laudable, as the Germans are not leſs addicted to the immoderate uſe of coffee than the Swedes, while their late intercourſe with the Engliſh has likewiſe introduced among them the daily and habitual uſe of tea, which was formerly drank only as a diluent in febrile and catarrhal indiſpoſitions.

Another German naturaliſt, Mr. MITSCHING, has inſerted a circumſtantial account of a new ſubſtitute for coffee in the Literary Gazette of Dreſden, No. 35, for the year 1797. He praiſes the fruit of the wild dog-roſe, or *roſa arvenſis*, L. as a valuable ſubſtitute, or at leaſt as an addition to coffee, which imparts to it a fine flavour and colour. This berry may, according to him, be preſerved for a whole year in a ſtate proper for roaſting it like coffee, if ſplit in two equal parts, and kept in a dry and temperate place. To determine the length of time required for roaſting this native coffee, as well as to aſcertain the colour it ought to aſſume, the inventor ingenuouſly directs the œconomiſt to make the firſt experiment with equal quantities of foreign coffee, and the berries before ſuggeſted; as ſoon as the coffee has acquired a proper colour, the berries will then likewiſe be ſufficiently roaſted. From his experience, two-thirds of the latter, with one-third of the former, produce excellent coffee; but, when friends are invited

vited to partake of it, he advises to invert the proportion of the ingredients.

In one of the latest Numbers of the "*Journal de Physique*," we met with an ingenious paper by Dr. BUNIVA, Prof. of Medicine at the University of Turin, containing an account of a variety of experiments tending to elucidate the doctrine of animal life, of the secretions, excretions, and effusions, natural as well as morbid; while the author endeavours more especially to prove that the red part of the blood, in a living animal, is retained in its proper reservoirs by the force of the vital activity of the parts, rather than by any defect in the capacity of the vessels and pores through the volume of globules. Some of these curious experiments we propose to communicate to the reader in a future Number.

From the same Journal, we learn that the *fluat of alumine* has been sent from Copenhagen to the Mineralogical School of Paris. This mineral is a whitish stone, semi transparent, lamellated, and tolerably soft; it is composed of the fluoric acid aud alumine.

The Society of Natural History at Paris, being anxious to resume their labours, have lately published a new and interesting volume of their Memoirs, in quarto, price six francs. The manuscripts for several other volumes are in hand, and will forthwith be regularly published, if the present volume should receive the sanction of the public. The editors of the Journal de Physique observe, on this occasion, that there cannot be the least doubt of the favourable reception of this work, as it contains memoirs written by the following authors, viz. Lamarck, Hauy, Cuvier, Ventenat, Geoffroy, Latreille, Decandoles, Gillet Laumont, and Leliévre.

From the splendid and valuable "Travels in the Southern Provinces of the Russian Empire," by P. S. PALLAS, lately published in Germany, and of which an English translation is considerably advanced in the press, we shall extract the following useful hints: The author informs us, that M. Subof, the present director of economical affairs in the government of Pensa, has published a treatise in the Russian language, pointing out the means of increasing the quantity of spirits in distillation. From a tchetvert of corn or rye, weighing 360 Russian pounds, he has, with the usual apparatus, produced six eimers and a quarter of spirits; or, by computing the Russ. eimer at thirteen quarts, upwards of twenty gallons English