

# Medical and Physical Journal.

VOL. III.]

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[NO. XVI.]

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

IF the following paper be judged worthy of a place in your very useful Journal, it is at your service. I am,

GENTLEMEN,

Your very humble servant,

Bedford Row, May 9, 1800.

THO. WHATELY.

## *A Description of a new Instrument for performing the Operation for the Fistula in Ano.*

By THOMAS WHATELY, Member of the Royal College of Surgeons, in London.

SIMPLICITY of construction is certainly a great recommendation to all instruments employed in surgical operations. We are not, however, to give the preference to any merely on account of their simplicity, as it may happen that the more complex may sometimes be better calculated to perform the operation in a proper manner; this is the case with Pott's instruments for performing the operation for the radical cure of the hydrocele, which I know, from experience, answer better than the more simple Seton lancet used by Mr. Hunter for the same purpose.

The ingenuity of artists has been frequently exercised in contriving an eligible instrument for cutting for the fistula in ano; an operation which consists in dividing a portion of the rectum and of the adipose membrane and the sphincter ani, so as to lay open the sinus or sinuses which constitute the disease. If these sinuses are not completely laid open, or if the division be made in an improper place, the first operation sometimes fails of making a perfect cure. Any of the instruments which have been made for this purpose may answer the intention in particular cases very well; but the blunt-pointed

crooked bistoury, recommended by that excellent surgeon Mr. Pott, certainly has the pre-eminence, and when the operation is performed after the recent bursting of abscesses in these parts, or where the external orifice is open enough to admit readily the passage of the knife, there is perhaps no instrument more eligible.

There are, however, many cases of fistula in ano, in which I think a better instrument may be used. It frequently happens in those of long standing, (which oftener come under the operator's care than the more recent ones) that the external orifice is very small; sometimes scarcely large enough to receive the point of a common probe. In some of these cases, the fistulous cavity leading to the gut may be easily traced by a probe. In others, either on account of small windings in the cavity, or from other obstructions which the probe meets with in exploring it, a little time is required in the examination, in order to ascertain the direction and extent of the sinus; and whether it communicates with the cavity of the rectum by a direct opening through the gut, or runs on its outside only, without such a communication with its cavity. When the external orifice of the fistula is very small, it will not be possible in some cases, especially where a patient is timid, to pass the probe-pointed knife so as to meet the finger, without its wounding more or less some of the parts in its passage. If the true direction of the sinus be not followed after the introduction of the knife, it must be apparent to every one, that it cannot be explored without giving much unnecessary pain, by an instrument that is liable to cut. And although it may not be difficult to push the instrument within the cavity of the rectum, so as to meet the operator's finger, yet it appears highly probable that this perforation may sometimes be made in a different part to that which was intended; an error which may occasion a failure in the cure. Sometimes we find the orifice of the fistula situated upon the buttocks, at the distance of three or four inches from the anus: In this case, the external sinus must be in part opened by the knife, before the probe point of it can possibly reach the operator's finger; and this may occasion some difficulty in finding the true direction of the sinus.

These circumstances led me to adopt a new instrument, which is the subject of this paper. This instrument consists of a very narrow probe-pointed curved knife\*, with a ring affixed

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\* This instrument may likewise be made perfectly straight. In this form it will answer extremely well where the gut is to be slit not much above the sphincter;



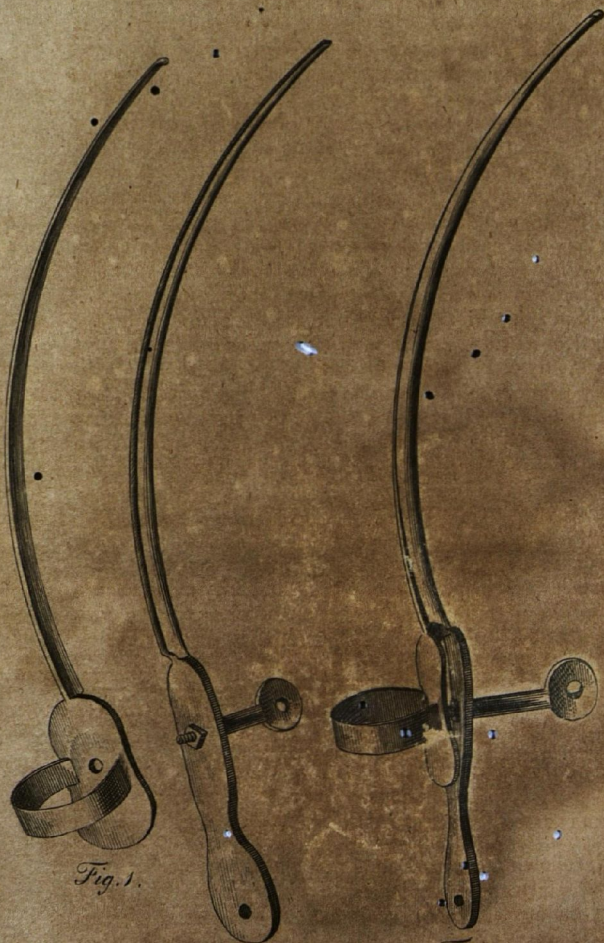


Fig. 1.

Fig. 2.

Fig. 3.

affixed to its handle, (*fig. 1.*) and a sheath on its blade, having a screw fixed to one end of it, to confine the knife and the sheath together, (*fig. 2.*). By the handle of this screw, the operator's assistant may draw off the sheath from the knife. At the point of the sheath there is a very fine division in its central part, to the extent of a quarter of an inch, in order to prevent the edge of the knife being injured in withdrawing it. While both parts are fixed together, they make a perfectly smooth and uniform instrument, not unlike a curved probe. (*fig. 3.*) This instrument may be introduced into any fistulous orifice that will admit a common probe; and may be easily passed along the cavity with one hand, while its point is received by the fore finger of the other hand thrust into the anus, in those cases where the gut is perforated by the disease. Where it is not perforated, this instrument, by means of the fore finger in its ring, can be very easily pushed through it, as Mr. Pott justly observes may be done in a like situation with the probe-pointed knife. At this stage of the operation, the sheath may be set at liberty in a moment by an assistant; after making a single turn of the screw, he may instantly, by its handle, withdraw the sheath from the knife. The surgeon directly afterwards finishes the operation by dividing the gut, as with the probe-pointed knife.

With this instrument, (made within the last two months by Mr. Evans, in a very neat manner) I have performed the operation much to my satisfaction in five different subjects; the last of whom declares, that the whole operation gave him much less pain than the previous examination of the sinus by the probe.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE following History of a Malformation is, I think, worthy of a place in your Journal. In the first place, it is no common malformation; it is, on the contrary, as Dr. Baillie remarks, a very uncommon one. (*Morbid Anatomy*, page 181.)

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sphincter; but where this is to be done nearly to the extent of the fore finger, as will be necessary in some cases, a straight knife will, without great care, be apt to cut the operator's finger. It may also be made of any degree of curvature, or with a handle, of any shape or size, instead of the ring.



181.) Again, it suggests a very useful caution against trusting implicitly, on all occasions, to the senses. And lastly, it proves, perhaps, that persons of experience may, by that very experience, be liable, in some instances, to draw hasty and false conclusions. You will judge of these reflections; and you will do with them, and with my history, as may, in your opinion, best answer the purposes of your Journal. I am,

GENTLEMEN,

Your obedient servant,

W. VAUGHAN.

Rocheſter,

January 20, 1800.

A few years ago, a child without an *anus* was born at Gillingham, near Rocheſter; and I was requested to ſee it. There was indeed no *anus*, nor even the leaſt index of one; but the *ſæces* were voided from a conical body extending upwards, from under the *ſymphysis pubis*, and reaching the umbilical region. The child ſucked ſtrongly; and the *ſæces*, in an almoſt fluid ſtate, were diſcharged as often as the child cried.

The urine flowed, I obſerved it twice, from a part concealed by the baſe of the conical body.

Some pronounced the child a female; and others, thinking it a male, were deſirous to make an *anus*.

The child lived only a few days. When the cavity of the *abdomen* was expoſed, and the inteſtines traced as far as the laſt *vertebra* of the loins, it was found, that the *rectum*, inſtead of deſcending along the *os ſacrum*, paſſed immediately into the *vagina*. The prolapſed part, which was the *rectum* inverted, was eaſily drawn backwards, through the opening, into the *vagina*.

Now, is it not likely at leaſt, that thoſe perſons who miſtook the protruded inteſtine for a *penis*, imagined, from their experience of Nature's monſtroſities, that the want of a *præputium*, and the preſence of a villous coat, were both *luſus naturæ*? If this were not the caſe, it is hard to account at all for their miſtake. This much is, however, certain, not only that the *rectum* was miſtaken for a *penis*, but alſo, that the *labia pudendi* were miſtaken for a *ſcrotum*, into which the *teſticoli* had not yet deſcended. If any attempt to form an *anus* had been made, the diſappointment of the operator muſt have been inconceivable and diſgraceful!

*Appendix to the Case of Malformation\* in a Fœtus.*

By T. POLE, (See Page 397.)

IN consequence of this phænomenon being thrown before the public through the medium of the Medical and Physical Journal, it has, agreeably to my wishes, met the eye of my ingenious friend, Charles Cooke, surgeon and practitioner in midwifery, in the city of Gloucester, (to whom I am indebted for this and another extraordinary *lusus naturæ*) who has obliged me with further particulars in the following letter :

“ DEAR SIR,

“ HAVING just read (in the Medical and Physical Journal) your Case of Malformation in a Fœtus, I am no longer surprised at your silence.

“ Soon after that fœtus was forwarded, I requested a medical friend in London to call and inform you of it; and, if you wished to know the particulars, I would readily answer your queries.

“ As I had not heard from you, I thought the parcel never came to hand; however, I am glad to find you did receive it, and will give a brief account of the presentation, labour, &c.

“ In January last I was called to Mrs. —; she had regular strong labour pains; I found the os uteri fully dilated; and the membranes distended; I could feel the action of the extremities of the fœtus within them, and labour appeared to be in that forward state, which required nothing but rupturing the membranes to produce a quick delivery, provided it should prove a footling case.

“ When I ruptured the membranes, both feet immediately followed the discharge of the waters, and the other parts of the child progressively succeeded by a continuance (with hardly any intermission) of strong labour pains, so that I had no time to regard the manner in which the child was protruding, for, before I could have supposed it possible, the head was also expelled. The latter circumstance, added to this being a first child, greatly surprised me; and upon passing my hand higher, to ascertain the cause of such an easy expulsion of the head, I thought, from what I then felt, that the violent efforts of the mother

\* The words “Unusual Conformation,” in the title of the plate, should have been “Extraordinary Malformation,” agreeably to that of the case.

In page 397, line 9 from the bottom, for “on the right side,” read “on the left side.”



mother had protruded the head entangled in the uterus. I was soon relieved from my apprehensions by feeling the ball upon the left side, and the funis on the same side, as described by you, connected with (what I at first supposed to be part of the uterus) the placenta.

"The child was born alive, appeared healthy, and lived thirty-six hours; but the placenta became extremely putrid before the child expired, which prevented my sending the whole in a better state of preservation.

"The mother is a thin, delicate woman, about twenty-two years of age; has been generally in good health, except having a cutaneous eruption, of which she has been cured near two years.

"She is in a situation of life not exposed to bodily fatigue or exertion, and not known to have entertained any improper mental sentiments during pregnancy. She cannot recollect having been surprised or frightened more than once during this period, and that was in the fifth month, when riding in a gig, the horse started and ran away, but she was neither thrown out nor hurt.

"Is it probable that the preternatural appearances in this case arose from the above fright?

"Is it your opinion that no malformation of the foetus, or its extremities, could take place at that period of gestation?

"The quickness of the labour (which was completed in less than an hour) I have no doubt arose from the singular adhesion of the head to the placenta, being the strongest possible stimulus to uterine action, during labour. Happy for me and my patient, that no part of the head presented. I observe, you have not noticed that the two first phalanges of the middle finger of the right hand were deficient\*.

"Since the above case, a partial preservation of the placenta has fallen to my lot, and terminated favourably; but the child suffered so much, (I suppose from the loss of blood sustained in the delivery) that it only survived, in a lingering state, six weeks.

"The mother, who is perfectly recovered, was very near being the first midwifery patient I ever lost, during a tolerably extensive practice for the last ten years. And although I have conducted upwards of eighteen hundred labours, I only recollect four foetal malformations, viz. a spina bifida; two monsters sent you; and the two fore-fingers of the right hand completely united,

"You"

\* Occasioned by my attention being engrossed in describing the head and upper parts of the body. T. P.

"You may communicate this letter to the public, if you think proper. I remain

Your obliged friend,

CHARLES COOKE."

*Gloucester,*

*May 3, 1800.*

"In answer to the queries proposed in the foregoing letter, viz. 1st. "Is it probable that the preternatural appearances in this case arose from the above fright?"

I can only answer briefly, that it does not appear to me probable that the appearances arose from the cause mentioned.

2d. "Is it your opinion that no malformation of the foetus, or its extremities, could take place at that period of gestation?"

It is my opinion that no malformation of the foetus, in any of its parts, can take place after it has once acquired its proper form, except what may arise from pressure, owing to some unfavourable position in utero, or from inflammation of two surfaces in contact with each other.—The first may produce incurvation, or other distortion of parts.—The second, adhesions. Instances of this latter we not unfrequently meet with; and it seems to have constituted one of the peculiarities in the case before us, to wit, the adhesion of the head to the placenta.

To account for the various malformations which are produced in an endless variety, appears to me to be beyond the stretch of finite wisdom.

I cannot suppose it possible for the human mind, under any, even the most violent impressions, to disfigure the foetus. If we could admit, as well authenticated indubitable facts, all the fanciful histories related by grave writers, respecting the wonderful malformations in the human foetus, as corresponding to previous mental impressions, either from frights or longings, there would be no difficulty in admitting the mother's imagination to have a controul in the original formation, or in deforming it when once well formed.

None of my own patients, whom I have delivered of monstrous foetuses, or other women with whom I have been acquainted, ever expressed any apprehensions of peculiar appearances in their children before delivery; but after they have been informed of the circumstances, they are prompt enough to recur to some past occurrence, in order to explain them, which had no affinity to the appearances in such children. On the other hand, a number of my own patients, as well as many others, have, from some shocks, or peculiar impressions excited in their minds, had strong prepossessions that their children would be deformed or marked with corresponding impressions; but in no one instance have I ever known it to be the case.

We



We cannot possibly entertain the most distant idea, that when a child is produced with two heads, or without a head, that it has been occasioned by the mother's having longed for such a thing, or that she had seen such a child in the streets or elsewhere. Neither can a scientific man, possessed of his rational faculties, conceive it possibly in the power of the mother to add even a supernumerary finger or toe to a foetus, in any stage of gestation, or to remove from the foetus, and from the uterus, an extremity already well formed, or to transpose any of its parts; all of which every now and then occur to our notice. If we admit the mother's mind, imagination, or will, to have the power of performing such miraculous feats, with such an admirable dexterity, in the human species, we must go still further, and admit the same powers in the inferior parts of the creation; for we are presented with precisely similar deviations in quadrupeds, birds, &c. Some men, strenuous to establish their opinions in favour of the influence of the mother's mind, contend even for the possibility of these effects in such animals being produced by the same cause; and say, there is not that vast difference between reason and instinct, or between human ideas and those of other animals; that we arrogate too much, when we compare the perceptions of the human mind with those of some of the more sagacious quadrupeds. But we do not observe it to be among such that the extraordinary effects in question are produced. However, if they will contend that they arise from the causes assigned; if they will refer the multitude of phænomena to the powers of the mind, perhaps they will have no objection to carrying their favourite opinions one step further, into the vegetable kingdom, and suppose the innumerable instances of monstrosity, which daily occur to our notice, are produced there by the same cause, especially as there appears so great a similarity in these to those of animals, or, at least, as much so as the nature of the two can possibly admit. So that, after all that has been said by writers on both sides of the question, or perhaps all that can be offered on the subject, we must be content to sit down and confess, that the true cause is involved in inscrutable mystery, as are many more of Nature's laws. We can only view them as *infusæ nature*; the true causes of which, or the manner in which the admirable powers of Nature are combined to effect them, will probably remain in the repository of her secrets to the end of time, as humiliating proofs of our limited comprehension.

One remark I have made of late is, that far the larger proportion of monsters are females, at least in the human subject. Those which I have collected do not admit of a single exception; though I have certainly seen several instances of male

monsters;

monsters : but those deviations from the common mode of Nature's operations have been generally in the organs of generation, yet, in this respect too, the majority has been in females.

These observations are not particularly addressed to my friend C. C. whose queries only demanded an affirmative or negative answer ; but I have availed myself of this opportunity of contributing my part to the doing away of those opinions which do not appear to be well founded, and which frequently excite considerable distress in the minds of pregnant women, who meet with alarming occurrences liable to agitate the mind, and thence give them painful apprehensions of their being productive of some disgusting formation in their children.

*Leadenhall Street, May 10, 1800.*

*Dr. Blackburn, on Light.*

WE have to lament, that Dr. Blackburn has been prevented by his avocations during the last twelve months, and at present has not sufficient leisure to arrange the proofs and reasoning upon which his conclusions are founded : he has, however, permitted us to lay before the public the results of his investigation in the abstract, viz.

1st. Light is a compound resulting from a peculiar combination of caloric and oxygen.

2dly. In all those phenomena which have given occasion to the idea that light is identical with, or a modification of, caloric, the manifestation of this latter principle is to be referred to the disunion of the constituent principles of light. The caloric, therefore, which light so frequently exhibits, is the result of its decomposition.

3dly. The phenomena of colours are to be ascribed to the different qualities of light, as containing caloric and oxygen in different proportions. These different proportions manifest themselves in the circumstances both of the decomposition and the formation of variously coloured light.

4th. The separation of light by the prism is to be regarded as a chemical decomposition, not a physical or mechanical division of light.

5th. The changes which take place in the colours of different substances, as of plants during the process of vegetation ; of metals during that of oxydation, are referable to corresponding



spondent changes, which these substances experience in their chemical action upon light.

6th. The evanescence, or, as it is frequently termed, the absorption of light, is owing to the complete resolution of the compound into its constituent parts.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

ALTHOUGH the purport of the following Answers to the Queries inserted in your last Medical and Physical Journal has already been given in the Treatises I have published on *VARIOLÆ VACCINÆ*, yet, in deference to the request of the gentleman who has proposed them, I do not hesitate in begging the favour of you to lay the following before the public; and remain,

GENTLEMEN,

With great respect, your obedient servant,

EDWARD JENNER.

*New Bond Street,  
May 15, 1800.*

ANSWER to the first Query :

The inoculated cow-pox, taking the result of a great number of cases, appears to me to be a disease as much milder than the inoculated small-pox, as that disease is milder than the casual small-pox.

To the 2d. I have used a variety of means to discover whether the cow-pox could be communicated by effluvia, but ineffectually.

To the 3d. A person on whom the vaccine pustule has been excited by perfect matter, and which has completely gone through the progressive stages of inflammation, maturation, and scabbing, is ever after secure from the small-pox.

To the 4th. I have seen pimples excited by the cow-pox with sometimes a little fluid at their apex; and, in two instances, a vaccine pustule, resembling that on the arm produced by inoculation; but in no instance a small-pox-like pustule.

To the 5th. The vaccine disease does not appear to make the least impression on the constitution unfavourable to health: on the contrary, in a great number of instances, especially among children, in whom the scrophulous diathesis has evidently been

been existing, its beneficial consequences have very soon been manifested.

To the 6th. No peculiar diseases have been noticed among those who have undergone the cow-pox at distant periods of their lives.

The 7th and 8th. Answered already.

To Dr. B R A D L E Y.

SIR,

AS an old fellow-student, I take the liberty of applying to you to send me some of the *matter* of cow-pox, which, I find by your useful Journal, has been conveyed to different parts in letters. I have made many inquiries in this neighbourhood to procure it; but as the complaint has not appeared lately among the dairies, I have not been fortunate enough to meet it. I find, however, that the country people are well acquainted with the disease, and described it very accurately to me. It is known by the Irish name of Shinagh. They have long attributed to it the anti-variolous power, which renders it so important a discovery to the happiness of mankind. I met with two people, who had been themselves affected with the complaint. A lady showed me the mark of it in one of her hands. She had it about forty years since, and was then informed by some of her neighbours that she never would have the small pox; but gave little credit to their assertions. She has, however, been since frequently exposed to the infection, and in consequence of her incredulity received several frights, particularly during the illness of her children, who had the small-pox rather heavily; but though she attended them very closely through the whole of their complaint, she did not take it herself. The other person is a gardener, who lives with a country gentleman of my acquaintance. He gave himself the cow-pox purposely by rubbing himself against some person who was affected with it, from a conviction that it would prevent the small-pox. This happened several years ago; and though he has often put himself in the way of the small-pox infection, and even lain in the same bed with his children when they were covered with it, he has not taken the disease. If I had time to make the necessary inquiries, I am sure I could multiply instances of this kind, as I heard of many others who had the cow-pox, and escaped the small-pox in the same manner. But as I saw and conversed with these two, who are people of un-



doubted veracity. I believe they will prove sufficiently satisfactory to you. May I expect the pleasure of a letter from you shortly with the vaccine matter inclosed? Your Journal is taken in by many of the faculty in this city. I hope in the course of time to be able to transmit to you some useful facts for insertion in it. I am,

SIR,

Your obedient humble servant,  
JOHN BARRY.

Cork, April 20, 1800.

## STATE OF DISEASES IN LONDON.

*Account of Diseases in an Eastern District of London, from the 20th of April to the 20th of May, 1800.*

No. of Cases.		No. of Cases.	
ACUTE DISEASES.		Hydrothorax - - - - -	
Typhus mitior - - - - -	4	Anasarca - - - - -	4
Peripneumonia - - - - -	2	Apoplexy - - - - -	2
Pleuritis - - - - -	1	Vertigo - - - - -	4
Sore Throat - - - - -	1	Hysteria - - - - -	3
Acute Rheumatism - - - - -	2	Epilepsia - - - - -	1
CHRONIC DISEASES.		Paralysis - - - - -	2
Cough - - - - -	5	Chronic Rheumatism - - -	16
Dyspnœa - - - - -	5	Scrophula - - - - -	2
Cough with Dyspnœa - - -	7	Prurigo - - - - -	1
Hæmoptysis - - - - -	5	Tinea - - - - -	1
Phthisis Pulmonalis - - -	6	PUERPERAL DISEASES.	
Dyspepsia - - - - -	8	Inflammatio mammarum -	1
Bilious Vomiting - - - - -	2	Menorrhagia lochialis - -	3
Gastrodynia - - - - -	7	Dolores post partum - - -	5
Diarrhœa - - - - -	14	INFANTILE DISEASES.	
Enterodynia - - - - -	6	Ophthalmia - - - - -	2
Constipatio - - - - -	3	Tinea - - - - -	-
Colica - - - - -	2	Scrophula - - - - -	3
Hepatalgia - - - - -	1	Convulsio - - - - -	4
Ascites - - - - -	3	Croup - - - - -	1

The variety in the state of the weather which has occurred since the last report, has been productive of some change in the constitution, and in the state of disease. During the few warm days at the beginning of the month, the number of pneumonic complaints was lessened, or the symptoms of them greatly mitigated.

The great degree of warmth, however, gave occasion, in many instances, to a hasty and impudent change of clothing; in

in consequence of which, upon the return of easterly and north-easterly winds, some, who were recovering from previous disease, suffered a relapse, and others were exposed to catarrhal or rheumatic affections.

To the same causes also may be attributed many complaints of the bowels, which have prevailed for some time. Diarrhoeas, colic, dysentery, and cholera are frequently the diseases of autumnal months which have succeeded a very warm summer; and some symptoms of these complaints, which have lately prevailed, though in a lower degree, may be attributed to the sudden variation of temperature. But, whilst diarrhoea has proved troublesome in some instances, a different and opposite state of the bowels, viz. an obstinate constipation, has occurred in others. This disease is very apt to prove troublesome to persons in advanced life, and not unfrequently is accompanied with serious and alarming symptoms. It may be traced to a variety of causes, and occurs under very different circumstances of the constitution. It is sometimes the attendant of high health, and the consequence of strong exercise, producing a rigid state of the muscular fibres; at other times it occurs to persons of a different constitution, and who are subject to different habits. In some patients, who are of a weak and relaxed temperament, the bowels, partaking of the general affection of the system, act but feebly on their contents, and their evacuation is but slowly promoted. Bile, which is the natural cathartic, is defective in its quantity, or is not sent forward regularly into the intestines. This state of the system is generally indicated by a peculiar appearance of the countenance, and is frequently accompanied by symptoms of hypochondriasis, and what has been termed nervous affections. These circumstances occurred in the instances referred to in the list, and the frequent use of different cathartic remedies became necessary. Aloes and rhubarb were found useful in these cases; but it was sometimes necessary to have recourse to the more active operation of jalap, cathartic extract, or calomel.

*Diseases admitted under the Care of the Physicians of the Westminster Hospital, from the 18th of April to the 21st of May, 1800.*

Continued Fever	- - -	10	Aphthæ	- - - - -	1
Intermittents	- - - - -	1	Ascites	- - - - -	1
Pleurisy	- - - - -	4	Asthenia	- - - - -	9
Measles	- - - - -	1	Cephalæa	- - - - -	5
Amenorrhœa	- - - - -	7	Colic	- - - - -	3
Anasarca	- - - - -	4	Convulsions	- - - - -	2
					Cough



# State of Diseases in London.

Cough	-	-	-	-	11	Lepra Græc.	-	-	-	-	1
Diarrhœa	-	-	-	-	5	Lichen	-	-	-	-	1
Dyspepsia	-	-	-	-	2	Menorrhagia	-	-	-	-	2
Dysuria	-	-	-	-	3	Obstipatio	-	-	-	-	1
Enterodynia	-	-	-	-	6	Paralysis	-	-	-	-	2
Erythema	-	-	-	-	2	Palpitation	-	-	-	-	1
Gastrodynia	-	-	-	-	3	Phthisis	-	-	-	-	3
Hæmoptysis	-	-	-	-	3	Rheumatism	-	-	-	-	0
Hæmorrhoids	-	-	-	-	2	Sciatica	-	-	-	-	3
Hypochondriasis	-	-	-	-	1	Struma	-	-	-	-	3
Impetigo	-	-	-	-	2	Worms	-	-	-	-	2
Itch	-	-	-	-	4						

## MONTHLY REPORT of DISEASES

Admitted under the Care of the PHYSICIANS of the FINSBURY DISPENSARY, St. John's Square, Clerkenwell.

*The District, in which the Patients of the Finsbury Dispensary are visited, comprehends the Parishes of St. James, and of St. John, Clerkenwell; of St. Luke; of St. Sepulchre within and without; of St. Bartholomew, the Great and the Less; the Liberties of the Rolls and of Glass-House Yard; the Town of Islington; the Parishes of St. Pancras; of St. Andrew, Foborn; and of St. George the Martyr, Queen's Square. This tract of Ground may properly enough be termed a North Western District of the Metropolis.*

LIST of DISEASES, &c. from April 20, to May 20.

	No. of Cases.		No. of Cases.
Continued Fever	8	Asthma	10
Sore Throat	2	Cough and Dyspnoea	15
Pneumonia	3	Phthisis	6
Hæmoptysis	2	Paralysis	4
Dysentery	3	Hysteria	5
Diarrhœa	7	Jaundice	2
Chlorosis and Amenorrhœa	16	Dropsy	9
Menorrhagia	12	Scrophula	6
Leucorrhœa	13	Gout	1
Acute Rheumatism	2	Prurigo	17
Chronic Rheumatism	14	Cephalœa	4
Lumbago	1	Worms	4
Hypochondriasis and Dyspepsia	12	Infantile Diseases	14
		Hæmorrhoids	2

The principal difference that is to be observed between the above list and that of the preceding month, is, that in consequence of a change of season it exhibits a much smaller proportion of pulmonary diseases.

The weather, it may in general be remarked, has more influence

fluence upon complaints of the lungs than any remedies which are applied. That credit is accordingly too often given to the advice of the physician, which is, in fact, due to a favourable vicissitude in the atmosphere. This remark applies more especially to those catarrhal affections which occur at an advanced period of life.

Persons at an advanced period of life are peculiarly addicted to a superstitious reverence for medicines; and yet it is to them that medicines are with the least efficacy and propriety applied. The coughs and asthmas of the aged are most frequently relieved by a change of air, even to a one less pure. It would be remarkable that change of air was not, in such cases, more generally prescribed, if we did not reflect that air is not an article in an apothecary's shop. At the same time, although medicines are seldom useful to the aged, by acting immediately upon the body, they may however be, in some instances, essentially so, by acting upon the imagination.

Upon the influence of the imagination in curing diseases, a judicious and ingenious pamphlet has been lately published by Dr. Haygarth, of Bath. It is a subject of great interest, and almost unbounded extent. The mind is continually meddling with the body, and interfering with the remedies which are applied to it. A due attention to this circumstance would afford much instruction to physicians, and throw new light upon the efficacy of medical applications.

Even a kindness of manner on the part of a medical attendant, that bespeaks an interest in his patient's health, may not unfrequently be conducive to his restoration; gratitude will cure a disease, when it is out of the reach of all other remedies. A patient will get well, or, which in many cases amounts nearly to the same thing, will endeavour to fancy himself well, in order to *oblige* his physician. On the other hand, a brutality, rudeness, or arrogance of demeanour seems, as it were, to induce a *spiteful* obstinacy in the disorder.

Most of the cases which have proved fatal, have occurred amongst persons at an advanced period of life.

The old age of *nature*, and the *artificial* old age of intemperance, equally defy all remedies, *except* the dephlogisticated nitrous gas of Dr. Beddoes; which, however, was not to be procured at the Dispensary.

In the cases of phthisis, little else was attempted than to relieve the troublesome symptoms. In a decided instance of this disease a *cure* cannot perhaps, in the present state of medical science, be reasonably expected.

How astonishing, that in one of the most hopeless of all disorders,



orders, Hope should be one of the most characteristic symptoms!

There is no disease which more invariably and obviously shows itself in the complexion and general physiognomy of the patient.

It is remarkable, that a connection may, in many instances, be observed even between the complexion of a person and his habitual occupation of life. Shoemakers, for instance, are almost uniformly of the melancholic temperament; a circumstance that can scarcely be accounted for, unless upon the idea that a person of a sanguine disposition could not easily reconcile himself to so sedentary an occupation.

The fact above alluded to, which was first stated to the author of this article by his friend Dr. Willan, has since been, in numerous instances, confirmed by his own experience. To the remarks of that learned and accurate observer, experience has almost invariably afforded a similar confirmation.

J. R.  
W. W.

To Dr. BRADLEY

DEAR SIR,

CASES of Polydipsia happening so rarely, it is not to be wondered at if practitioners in general are deficient in their knowledge of the manner of treating such complaints, when they actually occur in practice. I, for one, confess myself ignorant of the method in which such a case ought to be treated; nor, having never met with it as an original disease, I was almost induced to believe that it could only happen in consequence of some other existing complaint, as fevers, &c. On these occasions, thirst is a very common attendant, and is easily removed by curing the primary disease; but when it happens without any other complaint or symptom to direct us to the cause, it requires some knowledge of similar cases to enable one to prescribe effectually.—The following being a case in point, I beg leave to request your opinion on the subject, presuming that, from your extensive practice, you may have met with something of the like kind, and therefore may be able to direct me in the proper mode of treatment, which shall be implicitly followed\*.

A lady, some months ago, applied to me for advice, on account of a very extraordinary thirst which she at that time laboured under, attended with no other symptom of disease, excepting that she was now and then affected with what she termed a weakness of her nerves. Her appetite for food has never been in the smallest degree impaired; on the contrary, since she has been affected in this way, it has been rather better than before: her bowels, at the commencement, were not perfectly regular, but, by means of some gently aperient medicines, this was soon removed; her tongue, during the whole period, has been quite clear; and the only medicines she has taken were of the aperient and tonic kind; an emetic might have been proper, but the bad effects produced by one taken some years ago, deterred me from proposing it at this time.

Having asked her a number of questions relative to her former habit of body, &c. I learned that the catamenia stopped about seven years ago; and about, or rather before, that

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\* The Editors are convinced that this Case, communicated to Dr. Bradley as a friend, ought to be laid before the Public; and that the answers of their learned Correspondents will be far more satisfactory to Dr. Dyce and their other Readers, than that of any individual.



time, she was seized with an uncommon spitting, which lasted nearly eight months, after which she was quite well. The smell of what was spit up was extremely foetid; and in the course of a day, two or three handkerchiefs would have been used in consequence. About two years ago the spitting again returned, but continued for a short time, as it was only in a trifling degree: since that time she has kept in a tolerably good state of health till August last, at which time, being in the country, she ate about fifty or sixty cherries in a forenoon, and complained of being rather uneasy; for which she swallowed about half a glass of brandy, and was relieved. She ate her dinner, &c. just as usual, but next day the thirst commenced, and has continued much in the same way ever since. The quantity necessary for her drink in twenty-four hours may amount to about three quarts, or at most one gallon; at the same time she says, that an equal quantity of urine is secreted. About a month after she was affected in this way, she was seized with a very violent tooth-ache (her teeth being mostly carious); she applied a blister behind the ear, which, together with some doses of laudanum, to the amount of twenty-five, seldom more than thirty drops, to produce rest, procured her relief; during this period, which was about ten days, she had little or no thirst, but when ever the pain ceased the thirst returned. For some days past she has been taking a few drops of laudanum every night at bed-time (not more than twelve), from which she thinks that she has found some relief, not in her thirst, but in being less nervous. She has also complained, within these few days, of a great degree of cramp in the muscles of the left leg and foot, attended with some heat in the palms of her hands; but these being in no great degree, have not been much attended to. These, I think, are all the particulars that I have been able to collect, excepting that, in her outward appearance, she is rather thinner; and if, from the statement which I have now laid before you, you can advise in course what is proper to be done in this case, it will confer an additional obligation on,

DEAR SIR,

Your already obliged,

And very obedient humble servant,

WILLIAM DYCE.

Aberdeen, May 3, 1800.

*A Case of Ulceration in the Stomach.*

A STOUT middle-aged woman had long complained of considerable pain in her stomach, which sometimes darted through to her back; she likewise had occasional fits of vomiting in the morning. These symptoms were attributed by her friends to drinking, to which she was much addicted; the event, however, makes it more probable, that her sufferings were the cause of her drinking.

She passed the morning of the 29th of March last at an ale-house; and, at one o'clock in the forenoon, she was attacked suddenly with such a violent pain all over her belly, as to be forced to scream aloud.

Mr. Patten was immediately called to her assistance, who employed such remedies as he judged proper. He informed me, that when he saw her, her pulse was quick and weak; and some degree of coldness had taken place on the extremities.

The sufferings of the patient abated with her strength; she sunk rapidly, and expired thirteen hours after she was attacked with the pain.

I opened the body thirty hours after her death; and although the corpse lay in a room without a fire, yet the abdomen was distended with gas, and there was some emphysema in the cellular membrane, the effect of beginning putrefaction.—This evinces that gin and porter, though drunk plentifully during life, have little power in retarding putrefaction after death.

The first præternatural circumstance which occurred in opening the abdomen, was the effusion of about two quarts of a whitish fluid. It was discovered, that the source of this was a circular orifice in the stomach, about a quarter of an inch in diameter; and it appeared that the white fluid was gruel and the other drinks, which the patient had swallowed previous to her disease, mingled with the secretions of the stomach. Upon examining the internal surface of this organ, two ulcers were discovered, each about an inch in length, of an oval form, and apparently spreading towards each other. In the centre of one of the ulcers was the small hole formerly mentioned: its edge was thin and smooth; the substance of the stomach, near the ulcers, was thickened, and in some degree inflamed; the peritoneum was slightly inflamed, and the body had no other diseased appearance.

The disease which destroyed this poor woman, though uncommon, has been mentioned by authors. Bonetus, Morgagni, as well as others, have recorded similar cases; and the various



appearances of ulcers in the stomach are accurately described in Dr. Baillie's *Morbid Anatomy*.

This is, probably, a more frequent cause of sudden death than is generally imagined, for it is the second instance I have met with.—The first was a very young girl, whose only complaint was occasionally vomiting her food. This gave her so little uneasiness, that she tried as much as possible to conceal it, lest she should be advised to swallow medicines. One night she was seized with what was believed to be a very violent fit of the colic. Opiates did not diminish the pain; in a few hours cold sweats broke out, her pain left her, and she died in sixteen hours from the beginning of the attack.

Two circumstances occurred in both these cases, different, I think, from what was naturally to be expected.

The first is, the sudden attack of excruciating pain, which was felt all over the belly. I know no alteration in the diseased parts which could have occurred to produce this effect, except the opening in the peritoneal coat of the stomach, and the effusion of its contents into the general cavity of the abdomen.

The gastric juice gives no sensation to the stomach itself; but it is, perhaps, capable of exciting all the torture these patients endured, when applied to the peritoneum, a membrane not adapted by Nature to sustain its application.

The second circumstance is the very sudden death of the patients;—to what is this to be attributed? The most ignorant medical man might easily have foretold, that these patients could not recover after a hole was formed in their stomachs; but, I doubt if the wisest could have prophesied, that this event would put so speedy a termination to life. The symptoms of this malady are few and equivocal. But if it could be known, that any one had an ulcer in the stomach previous to its penetrating into the abdomen, a regimen and treatment might be prescribed, which, possibly, would contribute to heal it. For it is certain, that ulcers in this organ have healed; poisons have been swallowed, which must have eroded portions of the internal surface of the stomach, and wounds have been received into it without proving mortal.

The chance of curing this disease being, however, very small, let us turn our attention towards the causes and the prevention of so dangerous a distemper: we must here, as in other parts of the obscure science of medicine, have recourse to analogy and conjectures. Ulcers upon the external parts of the body are produced either by diseases or by accidents. The latter is the more common cause; and this may likewise be the case with ulcers in the stomach.

Many persons are extremely rash in swallowing fish bones, fruit

fruit stones, and other hard and sharp substances. Women frequently swallow pins without fear, so that it seems to me very difficult to give a good reason why ulcers in the stomach occur so seldom as they do. It is to be wished, that the danger of such practices was more generally inculcated, that a real benefit might result from their dissections; for it is known to all surgeons, that a very slight puncture in the skin sometimes degenerates into an ill-conditioned ulcer.

The stomach is not invulnerable, and it is susceptible of ulceration as well as the skin. The contact of the gastric juice, and the variety of foods which are swallowed together, with the action of the stomach, are not very favourable circumstances for healing an injury in this part; and should any of these circumstances, or some malady in the constitution, excite ulceration, a healing disposition may never take place; and, if the ulcer spreads and pierces the coats of the stomach, a sudden and painful death is the inevitable consequence.

*Grosvenor Street,  
April 23, 1800.*

JAMES MOORE.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I HAVE read with pleasure your correspondence on the various uses of *Digitalis Purpurea*. I have exhibited it in Phthisis Pulmonalis, and in several species of active Hæmorrhage, with unequivocal advantage.

Last October I was called to Mrs. J—ns, aged 32, about three months gone in her pregnancy; by painful and reiterated coughing, she expectorated much seeming purulent matter; her pulse measured from 100 to 110 strokes in a minute: she had likewise pains at intervals in the region of the uterus, attended with a profuse discharge of blood. I prescribed for her pills composed of opium, camphor, and digitalis. In three days, and by the time she had taken five grains of digitalis, her pulse was reduced to 70. The cough and expectoration now ceased to harass her; the uterine pain and hæmorrhage entirely subsided, nor did she experience any relapse. The second of this month she was delivered of a full-grown child.

The uterine affection in this case may be considered as having been, in some measure, produced by the severity of the cough and symptomatic fever; it was therefore only natural to hope, that by removing the causes the effects would cease.

By



By reflecting on the above case, I have been induced to attempt the extension of fox-glove as a medicine; and in a line of practice where, should it prove successful, it would add as many lives to the human species, as phthisis pulmonalis destroys, even adopting the much, by far too much, exaggerated proportion of Dr. Beddoes;—I mean, the prevention of abortion. •

The increase of the luxuries, and, perhaps, the increase of the private vices of the present age, have given to the British females an irritability of constitution, which renders them liable to abortion from casual, and often trivial increase of mental or corporeal exertion. In the female predisposed to abortion, there is a peculiar irritability of the constitution, and particularly of the uterus. The pulse, in general, is quick, though feeble, and, from causes that would not affect the healthy female, quickened 20 or 30 strokes in a minute. The usual medicines and regimen, directed as preventives of abortion, often fail; and in those females who have experienced two or three abortions, the prospect of future progeny becomes only a forlorn hope: thus, the peace and happiness of families are impaired, and the lineal succession of many noble and opulent families is destroyed.

It would be displaying a puerile enthusiasm, to hope much from the few imperfect trials which my practice, during the few last months, has afforded. Should it would, no doubt, be considered as arrogant, to presume a decision on a subject which, to establish, would require the united practice of hundreds; yet, I cannot help indulging a slender hope, that, one day, the fox-glove will rank the first medicine as a preventive of abortion.

By detailing the cases and formula in which I prescribed the digitalis purpurea, would only be needlessly filling your useful pages; every medical man conversant in practice, and acquainted with medicine as a science, will know how to modify its dose and formula to the existing circumstances of his patient. I am,

GENTLEMEN,

Your very humble servant,

WILLIAM CARSON, M. D.

Practitioner in Midwifery.

*Birmingham,  
Apr. 12, 1800.*

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

BEING fully sensible of the disgusting appearance produced in mixtures by an unsuccessful combination of spermaceti with water, I was much pleased to read in your 13th number, (page 263) an attempt to meliorate it. But though the contrivance is ingenious, I am far from being of opinion that the method recommended will be adopted in practice, on account of the strong rancid smell, and disagreeable taste, produced in the mixture by means of the heat used in the process; a circumstance of no small importance to a certain class of patients, whose capricious palates it is oftentimes exceedingly troublesome and difficult to please. I am further of opinion that the heat employed, (together with the additional proportion of yolk of egg, which will be found indispensably necessary to fit the spermaceti for the reception of the water) would dispose the mixture to become sour too readily, thereby not only rendering it disagreeable to the taste, but injurious to the stomach. Respecting the smoothness and uniformity of the mixture, I think, if the following formula be used, it will be found to succeed in every respect as well as soon as the one in question.

Spermaceti and double-refined sugar, each two drams; rectified spirits of wine, thirty drams; yolk of egg, a very small quantity; distilled or common water, half a pint.

The spermaceti and rectified spirits are first rubbed together a short time; the sugar is then added, and the tituration continued some time longer; then the egg, and lastly the water.

The above recipe, in the hands of a skilful operator, is almost invariably found to answer the purpose of forming an uniform mixture, unaccompanied by any of the disagreeable consequences above alluded to, and will, with the addition of any spirituous water, keep a sufficient length of time. I am,

GENTLEMEN,

Your very humble servant,

ANDREW BLACKBURN.

*Hereford, March 10, 1809.*



To the Editors of the Medical and Physical Journal.

GENTLEMEN,

YOU will further oblige me by inserting the following observations in your interesting and esteemed Journal. I am,

GENTLEMEN,

Yours very respectfully,

THOMAS PECK.

Higham Ferrars,  
April 15, 1800.

IN your last Journal, Mr. Davies very politely attempts an elucidation of his case of Adhesion of the Placenta, for which I thank him; and as he does not appear to be displeased with my commenting upon it in the *first*, I earnestly hope he will not in a *second* instance.

It is *indisputably* allowed, that "a firm adhesion of a considerable part of the placenta to the internal surface of the uterus" constitutes an *obvious cause* of its retention, and, when happening, frequently "formidable;" but, that the *hazard* of inversion, or producing symptoms of irritation, (by persevering in our attempts to extract it immediately) are *more* dangerous than the continuance of a con- portion of it in utero, is strongly suspected. Mr. Davies, with great justice, remarks, that "Nature alone points out the propriety of an early delivery of the placenta by its spontaneous expulsion after the birth of the foetus." If Nature, then, (whose kind dictates we do well to imitate) so clearly demonstrate this, it unquestionably behoves us to *assist* her when her efforts are *insufficient*. An early contraction of the uterus after delivery, for evident reasons, is earnestly to be desired; but, where the placenta (or a portion of it) attaches, *this* cannot take place. It therefore becomes our duty to separate it as *quick as possible*, and if it does not adhere to the *fundus uteri*, very little difficulty will be experienced in its extraction; and even in *that* case, the trouble to the operator, or pain to the patient, will be *comparatively* trifling.

Mr. Davies, in your last, does not hesitate to affirm, that the *exhaustion* of his patient was owing "to the fatigue occasioned by the previous labour, together with the irritation produced in endeavouring to detach the placenta from its adhesion to the uterus; for no material hæmorrhage had taken place at *that time*." Yet, in the account of the case we are told that Mr. Davies had lost the common aid to the extraction of the placenta by the rupture of the funis. He then says, "And an hæmorrhage of *too considerable* a nature taking place to trust it

to the natural efforts of the system, I endeavoured to lay hold of the substance of it, and bring it away." Unfortunately, Mr. Davies did not effect this. He therefore, very properly, gave his patient some respite, and anticipated better success at a little distance of time. "But," says he, "finding the *hæmorrhage* rather alarming, and the patient *sinking*, I resolved, in less than *an hour* from the first attempt, to make *another* effort, as the only alternative left to preserve her life." The *hæmorrhage*, therefore, appears to have given rise to Mr. Davies's fears for the safety of his patient—and the symptoms, faintings, colligative sweats, &c. most palpably arose from it: and though Mr. Davies appears to differ from me in attributing such symptoms to excessive fatigue, I am still of opinion they would not have existed but from the *hæmorrhage*.

I candidly admit the earnest solicitude of Mr. Davies for the welfare of his patient, and sincerely do I congratulate him on the happy termination of the case.

The grand object I have in view is to prevent, as much as possible, a *too hasty* acquiescence in that plan of treatment, which, *though successful* in a few cases, may probably conduce to laxity and supineness, and prove prejudicial in *others*: for, though the placenta may be retained for several days *with impunity*; yet, should the patient be lost from any untoward circumstance (in such situation), the practitioner would incur censure for leaving *that* to nature *so long* which *timely* assistance might preclude the necessity of.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

IF you think the following cases of *Hydrocephalus Internus* worthy a place in your valuable Journal, by inserting them in your next Number you will much oblige,

GENTLEMEN,

Dudley, *Worcestershire*,  
April 11, 1800.

Your obedient humble servant.

J. T. SHAW.

—Timmin's son, ætat. 6, of a healthful and sanguine temperament, had for some time past been observed by his parents to have had worms, from the voraciousness of his appetite and



and the unusual size of his belly, as likewise from his having voided several at different times; but as his health, in other respects, was not affected, they did not think it necessary to apply for any advice.

*March 1.* For a week past he has complained of a cold shivering, heat, &c. which continues with other symptoms of pyrexia; he had a saline mixture with an antimonial powder, which operated as an emetic, and brought off a large quantity of bile from his stomach with evident relief.

*March 2.* To-day I found him in extreme agony, screaming and struggling in a violent degree; at intervals he lies in a comatose state, taking no kind of notice of any one, and, if disturbed again, recurring into the screaming paroxysms; p. 100, small and weak; belly soft, of its natural size; had a loose stool yesterday after the operation of the emetic; tongue parched, skin hot and dry; drinks whatever is given him, but at times seems to swallow with difficulty; will not take any thing in substance, but refuses not panada, gruel, &c. The pupils are dilated, the left rather more than the right, and they do not contract on exposure to a sudden and strong light. I had his head shaved and bathed with vinegar; the apparent ease it gave, made me persevere in its use for some time, till its effects ceased; a blister was applied to the vertex, and iij grs. of calomel ordered twice a day. Ten o'clock P. M. p. 96, fuller and rather harder; still continues in the same state, screaming and tossing his head about, unless held by the attendants, and will not be put off the lap: although we cannot get him to speak, at intervals he seems to be sensible.

*March 3.* P. 100, weak and soft; has had no stool; belly still soft; passed a restless and disturbed night, seemingly in great agony, moaning during the short intervals he was free from the screaming paroxysms; makes but little water, and that involuntary: takes whatever fluid is given him. Cont. mist. salin. et calomel.

*March 4.* P. 120, belly soft, and no stool; skin dry; has made more urine, which is very high coloured, and what could be caught deposits a copious sediment; rested better last night, owing to xv. drops of tinct. opii in his saline potion; is more restless this morning, and screams with greater violence. Cont. medicam. et vesper. n. p. injiciend. enema domestic.

*March 5.* Last night the enema was administered, which produced a copious evacuation; had a better night; was in a comatose state when I visited him, but, upon disturbing him, again relapsed into his former screaming fit; he is nearly hoarse, and is much debilitated. The blister upon his head is nearly dry.

dry. Applic. empl. vesicat. inter scapul. • Cont. medicam. ut heri.

*March 6.* Rested a little in the night, and is quieter to-day during the intervals of screaming; does not moan as usual; had another glyster this morning, which operated like the former; skin rather moist; his nurse thinks his breath smells very foetid. Cont. medicam.

*March 7.* Blister discharges very much; seems to be sensible at intervals, and answers with a monosyllable; the screaming paroxysm continues not so long or so violent; the pupils continue dilated, but not to so great a degree; has had a natural stool; urine in greater quantity, but still involuntary; his breath continues foetid, mouth a little sore, tongue moist, which hitherto has been the contrary. Cont. med.

*March 9.* He neither screams so often or violently as on the 7th, but is very petulant if disturbed; his pulse is very irritable; the blister still discharges considerably; natural stool each day; sleeps little in the night, and what he has is disturbed. Cont. mist. salin. calomel. et augeat dos. tinct. opii ad gt. xx.

*March 12.* The screaming has left him; the blister is in a healing state, and he is mending as fast as possible; a diarrhoea having occurred, I have discontinued the calomel.

*March 16.* Every complaint has now left him except debility; continues very petulant; the pupils are still dilated beyond their natural state, but contract on exposure to light; his appetite will now take any thing given him. Hab. decoct. cinchonæ et omitt. op.

*April 1.* Has now recovered his usual strength, and there is no appearance of any relapse.

During the whole of the time I attended this patient, or since his recovery, which was rapid, considering the violence of the disease, he has voided no worms; nor is there at present any symptom of their presence.—I was led to present you with the above case, in consequence of Mr. White's asserting, in your XIIth Number, that he saw no good effects result from the use of mercury uncombined with digitalis; but can assure him I have proved its efficacy in several prior cases, and the present recent one tends to convince me of its utility.

About four months ago a child, seven years old, who laboured under a complication of disorders, with slight symptoms of hydrocephalus, after lingering some time, and taking a variety of remedies, at length the disease terminated fatally: upon examining the head, nearly two ounces of a limpid fluid was found in the ventricles, but no other unnatural appearance was perceptible.



*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE very laudable design of your excellent Publication being to rescue the practice of medicine from the hands of empirics, by encouraging a recital of such cases as may be conducive to the improvement of science, either by tending to establish just theory, or to refute vague hypothesis, I do myself the honour of transmitting the following account of a patient who was placed under my care in the year 1798; and, if it shall be thought of sufficient importance to merit a place in your Journal, the insertion of it will oblige,

GENTLEMEN,

Your most humble servant,

March 6, 1800.

G. LIPSCOMB,

Surgeon, at Birmingham.

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C A S E.

William Hunt, of St. Nicholas' Parish, Warwick, aged thirty years, had, during almost two years, been afflicted at irregular intervals with a difficulty of breathing, which came on more frequently in the evening when he lay down in bed; was succeeded by excruciating pain about the heart; and when the pain went off, great faintness and weakness followed. His appearance was emaciated, his skin tinged with a yellowish cast, and the smallest exertion brought on the difficulty of respiration. He slept very unquietly, and the pain, which commenced at the scrobiculus cordis, extended up towards his shoulders, particularly on the left side. His pulse was hard and oppressed, varying considerably when the breathing became affected; it then usually beat with amazing celerity, and was greatly laborious. As soon as the difficulty of respiration ceased, the pulse sunk rapidly, till it was scarcely perceptible. It has often decreased in frequency, while I kept my fingers on the radial artery, from 160 beats in a minute to 40. It continued very slow while the pain lasted, and gradually acquired its accustomed degree of celerity when that symptom ceased. The pain and oppressed breathing seldom took place at the same time; the former almost always succeeded the attack of the latter; and the duration of the paroxysm varied from a few minutes to three hours or longer. The urine was high coloured, and deposited a reddish flocculent sediment: it was less urbid when evacuated either in the paroxysm or soon afterwards;

wards; and its quantity was considerable: The state of the bowels was regular, but the pain returned more frequently when a diarrhoea had supervened. The skin was dry, but easily relaxed; and the pain was mitigated when a copious perspiration took place: the extremities were *very* cold during the paroxysms.

The unfortunate subject of these distressing complaints, previous to his being placed under my care, had consulted *several* practitioners, and taken a great variety of medicines without any considerable benefit. The wheezing and oppression of the chest, when he lay down, induced me to suspect that the functions of the lungs were interrupted by the presence of a fluid in the cavity of the thorax; but the strictest examination did not afford the smallest proof in support of that conjecture, for the thorax was not at all enlarged; and when he assumed a vertical position, he could walk about briskly without *any* inconvenience. The state of the pulse induced me to bleed him; twelve ounces of blood were taken away; and the *three* ensuing paroxysms were shorter and less painful than usual. His pulse became softer and less obstructed, and in the paroxysm did not increase to more than 110. The operation was repeated in a few days, but without any apparent advantage. The blood coagulated speedily; the proportion of red particles was but small, and the serum was turbid, resembling pus diluted with water; the violence of the pain and the difficulty of breathing again increased. The secretion of urine was promoted by diuretics, without much advantage; powder of digitalis was continued for a fortnight without any benefit. He complained of a great pain in the kidneys, and evacuated some gravel: the pain continued; and the diuretics were laid aside. A sort of asthmatic paroxysm took place, which was relieved by ammoniacum, squill's, and other expectorants, a very thick and viscid phlegm being thrown up. His appetite was much impaired, and he slept little. Nauseating doses of ipecacuanha joined with calomel were given, but no beneficial alteration followed the use of any medicine whatever. He was seen by different practitioners with whom I happened to be acquainted; and in April (about two months after he had been placed under my care) one of them strongly recommended the use of guaiacum; which was accordingly exhibited in large doses, but with no advantage. The pain in the paroxysm became intolerable, and opium was resorted to from necessity; for, as I had long thought there was a considerable derangement of the heart or the great vessels, it did not appear to me at all probable that antispasmodics would produce benefit. Opium was given in doses of 2, 3, 4, and 5 grains, at the commencement



mencement of the paroxysm, without any diminution of the violence of the pain or its continuance. Blisters were applied to the scrobiculus cordis, which discharged plentifully, but the pain continued to recur at short intervals. No particular alteration took place, excepting that the patient's appetite was a little increased by the use of infusion of quassia, until the 9th of May, when he complained of a total suppression of urine; and the next morning, as he was walking across his room, he fell down suddenly and expired.

The relations of the deceased very readily submitted to my request to be permitted to examine the state of the viscera; and the appearances, on dissection, were as follow:

The lungs were found diminished to less than half of their natural size, pale, flaccid, the inferior edges of both lobes discoloured and apparently impervious. No tubercles, nor matter in the bronchia; more than five pints of a pale watery fluid in the cavity of the thorax. The pericardium, greatly distended, contained one pint (exactly) of the same fluid. The heart considerably enlarged. The left ventricle full of coagulum. The right contained a large polypus, part of which passed into the auricle, and prevented the valves being applied close. The end, which terminated in three points, reached about three inches into the vena cava. The pulmonary artery was in a natural state.

The liver was discoloured, but firm and free from tubercles. The gall bladder of a large size, and full of bile. The duodenum in a natural state. The jejunum, ileum, and colon of a darker colour than usual. The bladder empty, though no urine had been discharged for more than twenty-four hours. The appendic. verm. was not quite half an inch long. The omentum was also remarkably small. The spleen and kidneys afforded no uncommon appearance.

The diminution of the size of the lungs seemed to have been as gradual as the accumulation of the water; and this accounts for no fluctuation being perceptible, nor any degree of tumescence observable, during the progress of the disease.

After the death of the patient (but not before) his relations recollected that he had sustained an attack of peripneumony about the time when the complaint of difficulty of breathing first took place, in consequence of immersion into the river Avon on a very hot day.

In the relation of such cases as the present, humanity cannot but shudder at the deficiency of the medical art. We see disease baffle the most industrious exertions, and we feel the insufficiency of human acquirement. For, if the understanding can develop the *cause*, the hope of relief is but further removed from us, and we *know* only to lament!

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

SHOULD the following observations meet with your approbation, by devoting a page of your highly useful and extensively circulated publication to the admission of them, you will confer an additional obligation on

Your obedient servant,

Grenville Street, London,  
May 3, 1800.

DAVID URVINS.

Two gentlemen, a few months since, took occasion, through the medium of the *Medical and Physical Journal*, to lament the alarming progress which *empiricism*, in different forms, is making in this and in other countries; and, at the same time, proposed means which, to them, appeared most eligible for its suppression and abolishment.

After the subject had been for some time in a state of dormancy, I was extremely happy in observing, in the table of contents of this excellent publication, a paper entitled, "*On the pernicious Effects of Quackery*," hoping therein to meet with some observations more consonant with my own ideas, respecting the method which ought to be pursued, for the purpose of arresting this lamentable evil.

Upon perusing this paper, I, however, suffered a degree of disappointment, in finding no additional matter to what had been before advanced on the subject, excepting the publication of a few cases, which were by no means necessary to strengthen the evidence against all kinds of nostrums and specifics.

Without wishing in the least to detract from the merit, ingenuity, and philanthropic intentions of those gentlemen who have favoured the public with their opinions on the subject; I beg leave to observe, that, in their zeal for the extermination of quackery, they have neglected to trace it to its origin and foundation.

To what are we to attribute the confidence which is so generally placed in the false attestations and hyperbolical assertions of men, who are only recommended to public attention by the extremes of *ignorance*, *temerity*, and *effrontery*; while those of *character*, *talents*, and *judgment*, in the medical profession, are frequently suffered to remain in the utmost obscurity, neglected and disesteemed?

I have



I have no hesitation in affirming, that *ignorance on the part of the public*, and not neglect of legislative interference, is the grand basis on which quackery is founded.

The benevolent exertions and persevering industry of those gentlemen who are endeavouring to introduce the physiological part of the medical science to public attention, cannot therefore be too highly esteemed or commended.

There is a class of individuals, which forms a large part of the medical practitioners of this country, who, without education, without abilities; nay, sometimes, even destitute of common sense, having, perhaps, for a few years been in the habit of vending and compounding medicines in the shop of a druggist or an apothecary, have the effrontery to deem themselves qualified to practise physic, and enrol themselves in the list of medical professors!

Such characters as these being permitted without detection to pursue their "murderous career," is an evil of still greater magnitude, and calls more loudly for the attention of medical men, than the more open profession and practice of the publishers of nostrums and universal remedies.

The dissemination of medical, or rather physiological knowledge, would enable unprofessional individuals to distinguish the scientific and meritorious from the bold and ignorant class of men above described; it would infallibly destroy the blind confidence which has hitherto been reposed in quacks, nostrums, and specifics; and would, consequently, prove of the greatest advantage to the regular practitioners of the important science of medicine.

Happy will it prove for society, when, in consequence of the philanthropic exertions of *Dr. Beddoes* and others, ignorance and temerity will be banished from physic, when quacks and specifics shall no longer exist!

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

FROM the animated and extensive discussion which the subject of inoculation of the Vaccine disease has undergone in your past Numbers, it appears that, in many instances, the first and often succeeding attempts have failed in ingrafting the matter. This disappointment is the more to be lamented, as the patient may, in the interval between different trials, run the hazard of being exposed to the natural variolous infection; and

and thus bring the practice among designing or shallow observers into disrepute, as it has frequently done the inoculation for Small-pox. Some of your correspondents, perhaps, impute this failure too much to the state of the vaccine matter; when they might find a better reason, from the particular condition of the skin where the incision is made on the arm of the patient. The arm of the child is sometimes exposed for a considerable time, often while using persuasions to quiet his fears, or to hide his face from the sight of a lancet. If it happens to be cold weather, the skin becomes pale and flaccid, the blood and warmth retreat from the surface, and the sensibility of the spot is diminished; for the part of the arm which is usually cut is not remarkably sensible. When my practice, formerly, lay much in this way; and finding my incisions often fail in communicating the variolous infection, particularly with very young children, I was in the habit of ordering the arm to be *well bathed* with warm milk and water; which, when wiped with a *rough towel*, would excite such a temporary inflammation on the spot, that I never failed afterwards. This gave the nerves of the part that susceptibility which was required to receive the poison; and I thought also, that the succeeding inflammation was quicker in consequence.

The JENNERIAN Inoculation has been introduced into this neighbourhood by Dr. Huggan, and earnestly supported by all the scientific part of the medical profession, as appears in your Journal. Like the early propagation of CHRISTIANITY, by its DIVINE LEADER, it was first "preached to the poor\*." The children of poor soldiers and poor fishermen first partook of its blessings: publicans and sinners have since embraced it; and the purity of its doctrine and practice is making proselytes to the very land's end in Cornwall. The time that the West Kent Regiment has been quartered in Plymouth, will therefore be a memorable period in the future History of Damnonia. But this is not the first instance where this regiment has been eminent for philanthropy. While quartered in Ireland, a dreadful infectious fever raged in the neighbourhood. These officers stepped forward; made their entertainments and amusements subservient to the wants of a starving multitude; opened, by their example, the purses of the rich; stemmed the torrent of contagion, and rescued hundreds from the grave. This heroic conduct convinced the deluded people in the district, that a regiment of British militia did not come for the purpose

\* There has, as yet, been no attempt to render this inoculation general in the Navy.—Vid. Med. Nautica, Vol. II. Art. Small-Pox.



of dragooning them into submission, but to share with them the nobler attributes of British union, British feeling, and British charity. Such a fact as this does not belong exclusively to the *ALBUM of Benevolence*; it is strictly medical; and was its spirit general, there would be little occasion for disputations on *Nitrous Vapour or Fumigations*. While the age is frequently shocked with the horrid barbarities of parish officers, and views with regret the supine and reluctant trials which modern politicians have made to give parochial charity the pure practice of the British constitution, it is pleasing to hear, that it preserves its innate virtues among the officers of the army and the navy. I am,

GENTLEMEN,

Your obedient humble servant,

T. TROTTER.

Crookland Bay,  
May 6, 1800.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE last remark of Dr. Yeats, in Number XV. of your Journal, are just come to hand — The Doctor's language in one instance appears exceptionable: What does he mean by a "manly recantation?" In my second Volume, I have admitted, that there were mistakes in my letter to Mr. Nepean; and in p. 39, there is such an apology made as the error seemed to require; for it does not affect the ground which I had taken in this dispute. I might have, with equal propriety, retained the term *nitrous gas*, as *nitrous vapour*. Is not Dr. Yeats contending that this vapour oxygenates the atmosphere, or bodies floating in it? If it gives out oxygen, what is the residuum? In what state of oxydation is the *azote* left? Is it *nitrous gas*, or *azotic gas*? If either of these, a poisonous quality, according to his own premises, must still be added to the surrounding medium\*.

But I deny that this vapour increases the respirable portion, on the very authorities which Dr. Yeats adduces. That oxygen may be separated, no one can doubt; but this separation must

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\* Does not this exactly agree with our first remark, that it adds to the atmosphere of a ship's deck the very substance which every intelligent officer is constantly endeavouring to expel?

must be spontaneous, if it is to add to the vital part of the air, and make it more salutary to life: it must form combinations with no other substance, but remain in a condition fit to be inspired by the human lungs. Therefore, neither Berthollet's experiments nor Lavoisier's opinion sanction the conclusion that the vapour of *nitric acid* adds to the respirable portion of the atmosphere; and by no means apply to the process of diffusing it in the decks of ships, and the wards of hospitals. Whatever may have been Dr. Yeats's first opinion on this species of fumigation, it is uncontroverted that the original author intended to destroy *contagious matter*. It therefore involves the whole history of fumigation, which, to trace *ab origine*, includes the ludicrous instances of necromancy, and does not degrade the gravity of discussion. We there follow the human mind, in its progress through ages of barbarism and superstition, to the attempt of ingrafting a popular delusion on the sound stock of human knowledge, that has been accumulated by chaste and accurate experiment.

If such is the defence of this once prevailing and unquestioned doctrine, in the hands of Dr. Yeats, what are we to think of the *farrago* for fumigation, still employed by many physicians of the present day? Surely, it is a more natural practice to look to the common atmosphere in its pure state, for the healthful supply of *oxygen*, than to seek it from chemical agents.

equal to the draught of a room, or window, or the draught of a chimney? I think with Dr. Yeats, that "fumigation is not only employed, are more calculated

to deceive by enveloping disagreeable smells, than to be beneficial by neutralizing and destroying miasma." But

this does not agree with what he says afterwards: "If we can by the powerful aid of chemical agents neutralize disagreeable exhalations, is it not a desirable object? No: it was much better to shift the poacher, and burn the straw on which he lay in Bedford Jail, than to neutralize the offensive exhalations by *nitrous vapour*." In the last sentence quoted, Dr. Yeats shows

much of that disposition which we have observed in all the favourers of fumigation; he recurs to it insensibly. He wants

*oxygen* to destroy a disagreeable smell; and seems to forget, that by opening the window he can have it in abundance: *quem*

*quæris adest*: he does not appear to like it in this form, but goes round by the Cape of Good Hope, and brings it from the

soil of Hindostan in an East Indiaman. He thus leaves the preventive of a court physician to the indelicate office of purifying

foul utensils, which a cleanly nurse at Haslar Hospital, or a decent London chamber-maid, would effectually correct by



soap and water, and throwing up the sashes; and that too long before a fumigating physician would be able to arrange his pipkins, to the entire discredit of this new-fangled prophylactic, and the utter confusion of all medical necromancy.

Dr. Yeats will allow with me, that all processes of this sort carry with them an air of mystery, and are calculated to impose on by-standers, and thus render attendants of the sick negligent and careless of the most essential parts of their office. These vapours also convert the white wash of our decks into a *nitrate of lime*, that makes the surface of the timber attract moisture in damp weather, which we abhor.

I must now conclude, that it is an object of national importance to convince the officer and seamen, by the most simple manner possible, that they have in their own hands the genuine prevention and cure of infection. This has, in fact, been the case; and I have the notion that a large portion of human misery has been opposed or relieved by it; perhaps, more successfully during the last three weeks of our duty than on any former occasion, in clearing two ships of the line of contagion and fever. The detail of this business must be reserved for future animadversion; because, what I consider as highly gratifying to every medical reader, it will unfold the *triumph* of scientific arrangements, that are capable of extending sympathy, truly British, to the sick-bed of a brave sailor, over a vicious system of tactics.

In thus taking my leave, I assure him of my perfect esteem, and certain of his learning and talents. I must also, your pardon, and that of your assistants, for the nasty remarks I have sent you. I am, with

GENTLEMEN,

Plymouth Dock,  
May 4, 1800.

Your very obedient and humble servant,  
T. TROTTER.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

THE very pointed manner in which Dr. Squire has animadverted on my opinion of "the expediency of an early delivery of the placenta," *naturally* engages my attention; which is the more excited from a supposition that he has considerably *perverted* my design. If, therefore, *as addenda*, you will give place,

place, in your next, to the following remarks, you will particularly oblige,

GENTLEMEN,

Higbam Ferrars,  
May 6, 1800.

Yours respectfully,  
THOMAS PECK.

THE first idea which Dr. Squire attacks, is that of the propriety of an "immediate removal of the placenta." Now, it is no difficult task to *wrest* an opinion: For instance, detach a sentence, and Scripture at once appears *false*. "There is no God." But, who has said it?—I have urged, that the placenta cannot be too speedily removed after the expulsion of the child. Dr. Squire has, very uncharitably, omitted the connection; "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;"—and I would, here, beg to be understood, "not to pull with a force which may endanger its separation."

Dr. Squire then says, "To wait no longer than ten or fifteen minutes for the efforts of Nature, is a position which cannot be too strongly reprobated, unless flooding, or other untoward accident, should require the assistance of a . . . . In Mr. Davies's case, however, the former took place; . . . . led me to suppose, that an immediate extraction of the placenta was requisite, as a means of preventing a hæmorrhage, which is *always* to be dreaded, and is not *unfrequently* fatal. . . . Would Dr. S. have remained an idle spectator in a case of great hæmorrhage, clearly arising from a *clotting* placenta? Would *great* have remained inactive in a case of confessedly "alarming" flooding, when proper "manual operation" might have prevented its continuance? Certainly, he would not.—Dr. S. appears to deduce a self-pleasing inference from the fortunate termination of Mr. Davies's case, by saying, "We may indulge hope in the most desperate situation, *this* instance affording a proof of the strength and resources of the human constitution." But, does *this* case sufficiently warrant a similar conduct in all such instances? Mr. Pott, in his Remarks on Amputation, Vol. III. p. 362, has a passage which may tend to illustrate my idea: "When a judicious man says that a limb *ought* to be removed, it is not to be supposed that he means to say, that it is absolutely impossible, at all events, that such limb can be saved; nor, that such patient must infallibly die, if the operation be not performed: no, he only means, *that from repeated experience of himself,*



himself, and others, in all times, it has been found that the circumstances above mentioned put the patient's life much more to hazard in an attempt to save the limb, than the operation does, in removing it; and, *therefore*, that humanity, as well as judgment, determines for the latter." As it respects the delivery of the placenta, I mean to say, in *cases of urgency*, I would prefer the *extraction* of it to the waiting for the efforts of Nature.—Dr. Squire has thought fit to quote very respectable authorities in support of his reasonings: First, Dr. Smellie: "If there is no danger from a flooding, the woman may be allowed to rest a little, in order to recover from the fatigue she has undergone, &c." A practice allowed to be consistent; a practice I *have* plainly acceded to, by saying I would wait "ten or fifteen minutes;" and I would not *even* confine myself to that period, except in *case of hæmorrhage*, or other untoward circumstance: I mean to say, that, *generally speaking, in that time* the uterus will contract sufficiently to throw down the placenta; but *even then*, how often do we find it disposed to remain in the vagina, unless it be removed *per artem*? The next extract is from Dr. Hunter's Lectures, "Whether the placenta comes in a few minutes, or an hour, use little or *no force*, &c." I perfectly agree with *this* practice *when I press* the *impropriety* of a "*forcible*" extraction of it:—nor have I *ever* found a *necessity* for any *exertion*, when the placenta has *not* been retained longer than ten or fifteen minutes; but I have *frequently* been called to cases where the child has been expelled one, two, or more hours, wherein great difficulty has actually occurred.—Dr. Harvey is then quoted: He says, "by pulling down the burden by the navel-string, *if a portion is strongly* adherent to the uterus, we may by *this* force invert the uterus." But who, in ten or fifteen minutes after the birth of the child, would *forcibly* pull down by the funis? If I understand Dr. Harvey in this place, he intends by it, that he would rather bring away the substance of the placenta by a grasp, than (*in cases of retention*) depend on the firmness of the funis.—Dr. Squire, fourthly, has recourse to Dr. Denman, who (after speaking on the propriety of leaving the placenta to the action of the uterus) says, "We are at liberty to act when Nature is not sufficient, or when *dangerous* circumstances demand our assistance." Is not hæmorrhage a dangerous circumstance? Dr. Denman goes on, "The *mere debility* of the patient is therefore *often* a reason why we ought to wait, without making any attempts to hasten the separation or extraction of the placenta; as an immediate separation, natural or artificial, would be an addition to the danger which she was before in." I presume it is unquestionably

questionably intended, in *this paragraph*, where the debility arises from *fatigue* in labour, and not from profuse hæmorrhage. We next have an extract from Mr. White: "Certain pain and danger *must* attend the operation; and, in *almost every case*, the odds are great but it is totally unnecessary, &c." But Mr. White does *not* say it is inexpedient in *every case*. I know instances where patients have materially suffered through the long detention of the placenta. Hamilton's *Outlines* are then ransacked, and we find that "the introduction of the hand is *seldom* necessary, and never should be had recourse to except in the most urgent cases." This meets my most cordial approbation. Dr. Osborne says, "The natural expulsion of the placenta is both easier and safer than the artificial extraction, however skilfully performed." I know *no* practitioner who will dare to deny so plain a fact. Drs. Clarke and Bland are, lastly, brought to prove, what every practitioner must know, that "the placenta should *not* be delivered in a *hasty* manner; and that it very rarely is detained." Perhaps the motto "*Naturâ monstrante viam*" is as deeply impressed in my breast as in that of Dr. Squire; and, I assure him, it would be my *last* intention to counteract her benevolent dictates; and *however erroneous* my opinions in *practice* may appear to Dr. Squire, so long as they are not in my own view *irrational or dangerous*, so long shall I heartily adopt them: and I am extremely happy in noticing Dr. Scott's ideas as consonant with *my own*, as well as the *experience* of many veterans in midwifery. Having, I hope, sufficiently explained myself, and satisfactorily proved it is not my aim to mislead, I leave the subject, *at present*, earnestly wishing the conduct of Dr. Squire, towards parties entirely unknown to him, may, in future, be divested of *asperity*.

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On the *C* *ion* for the Aneurism.

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— "Laudatur ab his, culpatur ab illis."

HORAT. Sat. II. Lib. 1.

THE various improvements that have taken place in the operations of surgery within these last forty years, are certainly sufficient to attract the attention, and claim the acknowledgement, of all professional men. Yet, upon inquiry, perhaps, we shall find, that we have not made such considerable advances



advances to perfection as might have been expected from our additional knowledge of anatomy and physiology; nor, though assisted by the accumulated experience of the antients, have we yet been able to diminish, or totally to remove, what have too long been styled the "opprobria medicorum." Among those subjects that still remain to be improved and established by our increasing knowledge and discoveries, there is none of greater importance to us as men, or more worthy our attention as surgeons, than the treatment of the Aneurism.

If we look back into the history of our art, we shall find the writers on surgery, fully acquainted with the nature and importance of the disease, explaining the different causes and situations of it; and also describing the method of operating for the cure, in particular parts of the body. And it does not appear that our knowledge of the disease is increased, or that we have arrived at a much greater degree of certainty in the treatment of it, since the days of *Ætius* and *Paulus Ægineta*.

It is true, the component parts of the human body have lately been more minutely examined and explained by the discoveries in chemistry; the circulation of the blood through the inosculating arteries has been more clearly ascertained and better understood; the doctrine of absorption has been more thoroughly canvassed and more accurately defined: but how far these theories are compatible with practice, and are likely to be attended with permanent advantage to the "ars medendi," it still remains for future experience and observation to determine. In aneurisms in the arm, we undertake the cure with more confidence and certainty of success; and from the respectable testimony of *Heister*, *Dr. Monro*, and *Dr. Wm. Hunter*, nobody would hesitate to recommend the performance of the operation. The reasons that encourage us to hope for success in the superior extremities, are plain and obvious; the arteries coming more immediately from the aorta, the ramifications being more numerous, and the pulsation in all the vessels more strong and vigorous. It may be remarked, that an improvement in the operation for popliteal aneurism was suggested by the justly celebrated *John Hunter*, viz. the taking up the femoral artery on the anterior part of the thigh, without doing any thing to the tumour in the ham; and this ingenious proposal has been sanctioned by experience. The numerous successful cases upon record seem sufficient to justify the attempt to save the limb, by including the vessel in a ligature in the popliteal aneurism, and even in some cases where the disease is situated in the femoral artery; but, when the aneurism is high up the thigh, or in the groin, which sometimes occurs, the young practitioner may be frequently at a loss

loss what conduct to pursue. He may be perplexed or divided in his own mind, by the various opinions of different authors; he finds the operation of taking up the diseased artery with a ligature, strenuously recommended, and as vehemently condemned. On the one hand, he is encouraged with the most animating prospects of success, by the plausible theory of the ingenious John Bell; on the other hand, he is told by the learned experience and profound judgment of Pott, that the operation had never, within *his* observation, been successful; and, in his opinion, ought never to be attempted.—The ingenuity of Mr. Bell's reasoning, and the slender testimony of Guattani, cannot surely determine the matter, when such an eminent surgeon, and so many respectable practitioners of the present day, entertain the very opposite sentiments. What has been said upon the treatment of aneurisms, in a modern system of surgery, does not appear sufficient to direct the inexperienced judgment of a tyro in the profession, nor sufficient to enable him, with confidence, to decide what plan to adopt for the cure. It is to be regretted, therefore, that a collection of *facts* has not been published, and a comparative view taken of the average of successful cases where the operation has been performed; by which means every one might be enabled, in some measure, to form his own opinion, and act from his own judgment, without being directed by the fallacious testimony of a single case, or biassed by the prejudiced voice of an individual.

Norwich, Feb. 20, 1800

HENRY REEVE.

of the *Flos Cerevisiae*,  
Fever.  
CH W N, Surgeon.

To the EDITOR of the MEDICAL and PHYSICAL JOURNAL.  
Gentlemen,

READING in your valuable miscellany, some observations on the medicinal use of yeast, by Mr. J. H. Grose, I take the liberty of sending you the particulars of a case of recovery, apparently from the exhibition of this valuable remedy.

Mrs. Northmore, living at Mr. Cadwallader's, in Charles Street, Hatton Garden, was delivered on the 25th of last December of a very fine boy.



The next day she was as well as women usually are in her situation; being costive, an opening mixture was prescribed, which had the desired effect. For three days subsequent to her lying-in, nothing particularly occurred, but on the fourth she complained of pain in her limbs and chest, with head-ache, great thirst, and dryness about the fauces. Sudorific medicines were prescribed; the next day she was much better, when I prescribed a weak decoction of the bark and snake-root. She was so much better on the 3d of January, as to be able to get out of bed, and sit up for three hours. On the 6th, she found herself again very poorly, and in the evening I was called in. I found her with a quick small pulse, pain in her head and limbs, and great prostration of strength; she had been all the day very sick at her stomach, and troubled with a griping pain in the abdomen. I prescribed an emetic, and at bed-time a dose of calomel with an opiate, which had their desired effects. Through the whole of the next day, she had a considerable remission of the fever. On the 11th she was much worse. Her senses were impaired, her pulse very small and quick, and she had several strong convulsive fits in the course of the day. At night she had subfultus tendinum, and talked incoherently during the night. Upon visiting her next day, I found her lying in a comatose state. Her tongue and fauces were blackly furred, and her pulse small. I directed a blister to be applied between the shoulders, and a saline draught with gr. viij. of the antim. calcinat. to be administered every four hours. An opiate was given her at bed-time. She had a tolerably good night. Dr. Squire, a humane practitioner, was consulted next day, and directed to administer the bark and port-wine very freely. On the next day, we found her so ill, that I, and myself, she could not attend to her. The bark she rejected, and the port-wine, of which hitherto she had taken a great quantity, was no longer of being able to afford her any relief. I no longer placed any hopes on medicine. I directed a pint of fresh yeast, of which I directed a table spoonful to be given her every three hours; which directions were very punctually attended to.—A very unexpected alteration took place.—Her pulse became quick, and less feeble; she looked upon her friends about her, seemingly as if sensible she was better—the subfultus tendinum ceased, and her skin became moist. The yeast was continued for several days, she gradually mending; and after taking two quarts, was quite recovered.

Hutton Garden,  
April 3, 1800.

I have the honour to be, &c.  
CHARLES BROWN.

An

*An Account of the good Effects of Alkaline Salts in counter-acting the Poison of Corrosive Sublimate.*

APRIL 17, 1796, John Podmore, a healthy young man, about 25 years of age, the son of a farmer in this neighbourhood, had an eruption upon his skin that was suspected to be the itch; in consequence of which he was advised by his sister to buy three pennyworth of corrosive sublimate (hydrarg. mur.) and two ounces of Glauber salts. The sublimate was to be dissolved in water, and applied as a lotion to the parts affected, and the salts to be taken in the morning fasting. The young man being totally unacquainted with the articles he had purchased, made use of the mercury instead of the salts, putting about one half of the quantity he was possessed of into a large cupful of warm water, stirring it about for some time with a spoon, and then drank it. Fortunately for him, a considerable portion of the sublimate remained undissolved in the bottom of the cup. The quantity swallowed (from what was left) I supposed to have been not less than half a drachm. After this he took a walk into the fields; where finding himself seized with a violent sickness, vomiting and griping, it was with some difficulty he could come home. The family, observing him so extremely ill, were much alarmed; which induced his mother to examine the contents of the cup, in which the salts and sublimate had been mixed. To her great concern, she discovered the error; upon which I was desired to attend him. It being then near two o'clock, the moment I was informed of the situation, two cases of the kind occurred on a similar occasion, published by ARLES BLAIND in the Edinburgh Med. Com. occurred to me. I directed half an ounce of salt of tartar to be dissolved in eight ounces of water; of this solution he took a large table spoonful, which afforded him much relief, by abating for a short time the violent pain in his stomach; he afterwards took an emetic, which operated powerfully. Notwithstanding which, he had frequent returns of the pain, which extended through the whole course of the intestinal canal; but was as often relieved by the alkaline solution, which he took occasionally for several days. On the 18th, a purging draught was administered, and at night an opiate. This day his tongue began to swell; a cold sweat broke out all over him, accompanied with a slow and feeble pulse, a trembling of his limbs, and a total debility of the whole



whole system. 20th, Continued nearly the same, the opiate having procured but little rest: several large pustules of a livid hue appeared upon his face and breast. 21st, A copious pytalism came on, which continued for many days. The intestinal canal was affected quite to the anus, from which oozed a corrosive ichor, that excoriated the external parts, and rendered them so sore, that it was with difficulty he bore clysters of olive oil and milk to be injected, which I directed to be administered twice a day, in order to lubricate and wash the parts from the acrimonious discharge, as well as to empty the intestines of any faeces that might be retained in them. 23d, The pain of the stomach and bowels being considerably abated, I ordered him a decoction of Peruvian bark, with the addition of Huxham's tinct. of the same, and chalybeate wine, to be taken three times a day. This plan was pursued till the 29th, taking opiates every night; but they did not afford him that relief I expected, for he got but little rest until the salivation left him, which happened on the 28th. From that day his appetite began to mend, and his strength gradually returning, he discontinued his medicines.

During the whole of his illness he was supported with milk, gruel, and chicken broth. Notwithstanding which, he was more reduced both in bulk and strength, than any patient I ever saw in so short a space of time. Had the alkaline solution been administered immediately after the poison was taken into the stomach, there is little doubt but the decomposition of it would have been more effectual, and the patient's sufferings in consequence of it considerably alleviated.

*Ketley, May 7, 1800.*

J. EVANS, M. D.

*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I OBSERVED in the last Number of your Journal, some "Remarks on the Expulsion and Extraction of the Placenta after Delivery," by Dr. Squire; to which, he says, "he was induced from the perusal of two communications on the subject;" whereio, "he thought it a duty he owed to society to prevent, as much as might be in his power, the mode of treatment therein described."

Since he has involved *two* correspondents, equally "recommending a mode of practice so opposite to rules laid down by

by the ablest and most experienced men of the present time," and, withal, "so dangerous in its tendency," I can only be responsible for *one*, and think it equally my duty to refute a charge so palpably erroneous, and so injurious to medical reputation; for, although the doctrine he reprobates is still maintained by some respectable practitioners, and, in some cases, perhaps is indispensable; yet I am convinced, from repeated observations, that the contrary mode of treatment is, for the most part, the most eligible.

How the Doctor came to confound my sentiments with those of Mr. Peck's, on the "Expediency of the *early* Delivery of the Placenta," at all events, I cannot possibly account for. For the principal design of publishing my case was to recommend the *contrary* practice, unless imminent danger supervened; which induced Mr. P. to comment upon it in a former Number of your Journal; and if, in the management of my case alluded to, it appeared that I deviated from the sentiment, the necessity arose from the appearance of symptoms which portended danger, if I had longer delayed to proceed in the manner described.

As to the Doctor's observations on my treatment of it, I am not at all concerned to notice; they might serve to amuse him in writing, and they do not offend me in reading them. And as to the *liberality* of his sentiment in asserting that the subjects of his remarks were the "erroneous opinions of men who have had no experience," likely to "mislead the ignorant and unwary," I shall suffer it to prove its own confutation, only begging leave to observe, respecting medical "experience," that as ample a share of it falls, sometimes, to the lot of private practitioners, as certain public teachers.

I now take leave of the Doctor and his Remarks, wishing him all possible success in his intended publication on the same subject, to which, perhaps, the Remarks are a kind of prelude; and that every future attempt to serve the general cause may be attended with every beneficial effect. I am,

GENTLEMEN,

Yours respectfully,

H. DAVIES.

Piccadilly,  
May 10, 1800.



*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

I TAKE the liberty of sending you this letter, in answer to three of your correspondents, who have animadverted on my opinions, respecting the use of opium and venæsection, in the practice of medicine, which I will thank you to insert, if you think it worthy of a place, in a future Number of your Journal.

I pass over, without any notice, what Mr. Urvins, the first of these gentlemen, has, in the preface to his remarks, hinted by way of caution to your readers, against the reception of *hasty or extravagant notions*, which I suppose mine are thence implied to be, as also his oblique imputation of enthusiasm to the encomiums which I have bestowed upon opium in the cure of febrile diseases.

If this gentleman thinks he can see any thing like argument to the purpose, from the conceit of any person's being equally justified in recommending the complete expulsion of opium from the *list of remedies*, because he may have, by accident, been a witness to its fatal effects, or the mis-application of it, it is sufficient answer, that I have not contended against venæsection from the consideration of its ill effects only, but that under any circumstances, even the most favourable to the employment of it, as a means of cure, I do venture to affirm that it is never necessary. This, in whatever light it may appear to Mr. Urvins, is no hasty or extravagant notion, but what I have ascertained to my complete satisfaction, at least as far as I can trust to the facts and observations on which this conclusion is grounded. Venæsection may therefore, in my opinion, be as safely and as advantageously superseded in inflammatory fevers, as in any other disease, in which its disuse has been acknowledged as an improvement.

With regard to venæsection in croup, I have, in a former part of this Journal, (Numb. XI. p. 56.) briefly stated my reasons why I do not think it even admissible; these were the result of some experience, much reflection on the danger of bleeding children at the early age at which this disease generally makes its appearance; as also the infirm state of health of several of my acquaintances, whom in early life I can recollect to have been subject to croup; and, on that account, occasionally bled. To these I shall here add, that, if it is contagious, as has been alleged, this would weigh with me as a further objection against the employment of the lancet.

As Mr. Purton has had much experience in the treatment of croup, I dare say that he has sometimes observed the symptoms, after they had been alleviated by means of the lancet, return with redoubled violence, and carry off the patient before any assistance could be afforded him.

The relief obtained in croup from opium has certainly appeared to me to have been more permanent, and the recurrence of the disease less violent, than after the employment of venesection. If opium is to be trusted as our principal remedy in croup, I must again repeat it, the dose of it must be proportionate to the violence of the disease; and, what is of equal importance, must be administered early in the disease, otherwise it will be equally as inefficacious, in averting the impending danger, as any other means which we can devise; for, as Dr. Ferriar justly observes\*, "if the alarming symptoms are not mitigated during the first six hours, the disease generally proves fatal." And we learn from the same respectable authority, that "in the case of very young children we must almost despair, for it is extremely difficult to procure any blood from them by the lancet, and leeches afford a very inadequate mode of depletion." Under such circumstances then, and especially after the second bleeding and emetic have failed in putting an end to the disease, when we are told that "we have nothing to hope from medicine," surely the humane physician may, without incurring any risque of censure, have recourse to opium, rather than leave his patient unavoidably to perish in the unequal struggle with so formidable a disease as croup; and if he ventures to administer it with freedom, for once, perhaps, he may not be disappointed. Not only does this learned author strenuously enjoin venesection in croup, but also sanctions a licence in performing it, to me altogether

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\* Medical Histories and Reflections, by J. Ferriar, M. D. Vol. III. Cadell and Davies, in which the reader will find a very accurate description of Croup; such, indeed, as might be expected from the pen of that learned writer:

About three years ago I was desired, a little past midnight, to visit a boy, about nine years old, whom I found expiring in a fit of the croup; I was told, that after a slight indisposition of two or three days, he had been attacked the preceding evening in a similar manner, for which he had been directed to take an emetic, and seemed to be better in the course of the day, till towards evening he was again seized as I found him. On dissection, I found some of the branches of the trachea completely filled with a membrane-like exudation, which had entirely cut off all communication with the external air; the aorta, and its larger branches, were lined with a membrane of the same appearance. Had proper remedies been applied on the first severe attack, this boy would have had a better chance for his life.



together unjustifiable; the surgeon is told not to be scrupulous about the appearance of *mangling* in circumstances so dreadful. Now, if the arm is made choice of for that purpose, we know from anatomy, with what caution this nice operation must be done, to avoid doing mischief. Would it not be better in such cases, in which blood-letting is held to be indispensably necessary, to open one of the small branches of the external carotid artery, than run the risque of doing an irreparable injury, by rudely performing an operation, that requires the greatest delicacy and steadiness on the part of the surgeon, and which, at best, is seldom or never performed in the nice manner that it ought to be\*? Were I again to have recourse to venesection, I would generally prefer the external jugular vein; as, here, the orifice may be made with less risque to the patient; it closes again as readily, and the blood will flow in a larger stream than from the veins of the arm or leg, therefore a less quantity will suffice.

Mr. Purton having insinuated rather too hastily, that the cases of croup which fell under my observation must have been of the spasmodic kind, if they yielded to opium before a general depletion had been made; I shall just observe in answer, that though the inflammatory and spasmodic may, in their less distinct forms, often with difficulty be distinguished from each other, yet, there are sufficiently unequivocal marks by which a case of genuine cynanche trachealis may, I think, always be known. The cases to which I alluded chiefly, were first attacks, such, I believe, are always inflammatory. Indeed, I think it probable that the spasmodic croup never occurs as a primary disease, and, perhaps, is to be met with in those instances only, in which the inflammation had extended from the inside of the trachea to the neighbouring muscles; it ought, therefore, to be regarded as a variety, or the consequence, rather than as a distinct species of croup.

I shall conclude this part of my letter, with expressing my regret, that the venerable father of physic, when he adverted to the inutility of *antispasmodic*, in preventing the fatal issue of this disease, had not sufficiently proved the efficacy of the most powerful of that class of medicines. (First Lines of the Practice of Physic, CCCXXX.) I come next to Mr. Dray's criticisms, which he too, like Mr. Urvin, has thought proper to introduce with an admonitory hint, nearly of the same tendency.

This gentleman, in his first animadversion, points out, what he

he conceives to be an inconsistency, or contradiction of myself, which he infers from the theory that he has been pleased to impute to me, as "*the basis of all my practice*;" and the assurance which I had given, in the outset of my communication, that wherein my practice might differ from that of others, it was entirely the result of experience, as I had no *theory to serve*; by which was simply meant, that, what I was about to submit to the consideration of the public, was founded on the sure basis of experience, as I had no fanciful or delusive speculations to gratify. The *debility* which accompanies every deviation from the healthy state, and is the unavoidable consequence of increased action of the system, was held out solely with the view of precluding venesection, or whatever tends to debilitate further, as a matter of course; but this, surely, was not insisted upon, as the principal, or only circumstance, by which our method of cure ought to be regulated; for I am equally aware with that gentleman, how *truly incongruous* a practice, built upon such vague and unsatisfactory grounds, must be. I shall here, however, briefly state, for it can be done in a few words, what really is my theory of inflammatory fevers, and leave it to the enlightened and unprejudiced part of the profession, to decide how *properly* it is adapted to the practice which I have proposed. In inflammatory, or fevers with arterial strength, there is, it is presumed, an excess both of stimulus and sensorial power\*. Now opium, exhibited in such a dose as to afford a greater stimulus than that of the inflammatory pains, will speedily and effectually exhaust the sensorial power, or the greatest part of it; hence, if the spasm of the extreme arteries is not overcome, it will cease to excite the parts affected, or the whole vascular system, into inordinate action, from defect of sensorial power.

By venesection, if copious, the activity of the whole system, from the sudden loss of part of that important fluid which conveys nutriment and stimulus to all the parts of it, is instantly diminished; whereby some of the functions, particularly that of the brain, are as suddenly impaired, or cease entirely, as appears from the drowiness or fainting that often follows great and sudden loss of blood; hence the protracted period of diseases, and slow recoveries, after the free use of the lancet. So far from theory also, we think the preference due to opium, as less debilitating the system in a less debilitated state, after its action, than venesection†.

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\* Zoonomia, Vol. I. Sect. Stimulus and Exertion: Vol. II. Theory of Fever, Art. Incubantia.

† Such of your readers as are not quite disgusted with the French bombastic



It is unnecessary, to follow Mr. Dray through all his reasoning, as, from the *data* only which he has assumed, that must be inconclusive. I shall not either contend with him about the propriety of changing the mode of treatment, in the case of the military men which he mentioned, that had been adopted previous to his attendance; as it must be plain to every discerning practitioner, that, under the circumstances as he states them, a plan of cure, conducted with a view to the concomitant debility *only*, must have been obviously absurd, and the issue, as might be expected, generally fatal. I find, however, that we agree so far in our ideas of the treatment necessary in inflammatory fevers, as, that we both think it right, to employ "means which diminish increased excitement;" our only difference of opinion seems to be, whether these *means* ought to be such as suddenly increase the stimulation, so as to exhaust the sensorial power completely, or such as suddenly diminish both. There is also a difference of opinion between us respecting the effect of blisters, which he is inclined to think are apt to increase the symptoms, when applied before "the inflammatory diathesis is sufficiently subdued." I consider the action of blisters to be merely local, and, as I barely hinted in my Inaugural Dissertation on the Influenza, they produce their effects solely, by exciting a greater irritation in the part than that for which they are applied. I can therefore see no impropriety, nor did I ever experience the smallest increase of the symptoms, from the early application of them in pneumonia, or other case of phlegmasia.

Mr. Dray's arguments, taken from the practice of the ancient physicians, as well as his own experience, and that of the ablest practitioners of our own day, allowing them their full force, go only to prove that venesection has been, and may still be employed in phlegmasia with advantage, so far as to remove the danger with which they are attended. This has never, to my knowledge, been denied; but they do not invalidate the testimony which I have given, or overthrow the doctrine that it holds out in favour of a method of cure, in these diseases, in which venesection may, with safety, and evident advantage, be emitted.

All that has been urged against the early exhibition of opium in synocha, &c. has, in my opinion, arisen almost solely from prejudice, or the misapplication of it in some shape or other;

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bastic accounts of their battles, their robberies, and their travels, may find, in the 3d Vol. of Sonnini's Travels in Upper and Lower Egypt, p. 68, a remarkable instance of a severe species of ophthalmia being cured by an over dose of opium, after a copious bleeding had failed in giving any relief.

hence effects have been imputed to it which it does not produce, and explanations given of its action, equally erroneous.

This remark is occasioned, principally by what has been written on this subject by the illustrious author of *Zoonomia*, (Vol. II. Article *Incitantia*, p. 2, 1, 6.) where we are told, that, in the cases of phlegmasia, in which opium gives relief, it acts first by increasing the pain, and is sometimes followed by so great a torpor, as to produce "the death or mortification of the parts;" hence we are cautioned against its use in inflammations, particularly that of the bowels; and further, that the relief thus obtained is not permanent, as the pain is said to return with its former violence.

With the utmost deference, however, to so great authority, I must here take the liberty of saying, that I suspect these to have been assumed, as the effects of opium, in conformity to the learned author's general doctrines, or perhaps from instances of timid or injudicious exhibition of it, rather than clearly demonstrated by any fair or decisive trials of it. Thus far at least I have presumed from my own experience. I have not met with an instance of relief, in inflammation, being procured by opium in a full dose, in which the pain was first increased, though this has been looked for. When given in small doses indeed, as I have observed, it will not fail to increase the pain, by adding to the stimulation, already too great, as well as producing a still greater quantity of the spirit of animation, by which means the vital powers of the system will be worn out by such inordinate action. In one case of enteritis which I have met with, six grains of opium, given in two doses, produced the happiest effects. I have certainly observed the return both of inflammatory and colic pains after relief had been obtained by opium, but in no one instance with the same violence.

I have been the more readily induced to meet this celebrated physician's objections to the exhibition of opium in the first stages of phlegmasia, (they would have been unanswerable if well founded) as, upon the same grounds I can, with confidence, correct another statement of his respecting opium, which he has certainly assumed merely from conjecture.—In the beginning of the same paragraph, he says, that this relief does not occur till some hours after the exhibition of opium. I know from frequent observation, that opium, if given in a sufficient dose, will produce its utmost effects in less than an hour; when it fails in that time, we may be assured that the dose has been too small, and ought to be repeated in the same, or half the quantity previously administered. In slighter cases



of inflammation indeed, (in such only, I suspect, has opium been ventured upon, in the first instance) in which relief has been procured some hours after the exhibition of opium, it seems to have acted, by assisting the other stimuli, in reducing the sensorial power to the natural quantity, rather than by exhausting it entirely by its own specific powers.

I shall not, at present, enter into any further discussion of the propriety of substituting opium in the cure of synocha, &c. instead of venesection, as, in the end, that must be decided by experience *alone*; to that test then, in the hands of the liberal and intelligent part of the profession, as far as I am interested in the issue, I do most cheerfully appeal. Whether, however, the practice which I have so strenuously recommended, be ever adopted or not, I feel conscious that it was not communicated to the public with any view of entering into a controversy on the subject, or from any hope of being able to build my fame on the reception it might meet with, as that is not at all necessary; nor from the affectation of singularity; but solely, from the persuasion and experience of its being the preferable and safest plan; and with the sincere wish, that it may prove, in the hands of those who may be inclined to give it the trial, as satisfactory as, in the course of nearly five years, it has been in mine\*.

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\* As Mr. Dray seems to think my "opinion in its nature so calculated to mislead young and inexperienced practitioners, as to be productive of the most fatal consequence," I may, with equal justice, reply, that it cannot be of less dangerous tendency to allow so unlimited a power in the use of the lancet, as to authorise, not only stout athletic adults, but even infants, to be bled ad deliquium. The lancet therefore may become a formidable weapon, when wielded by ignorance, inexperience, or enthusiasm. When I was about eleven years old I was thrown from horseback, and pitched upon my head; and had I been permitted to lay where I fell for a few hours, till I had recovered from the state of insensibility in which I was carried home, I might probably have escaped the severe discipline which I afterwards underwent. A bleeder was sent for immediately, who, in addition to what I had lost, from the coronary artery of the lips, which was cut through, took away a flap plate full of blood from each arm; having very carelessly bound up the orifices, they were burst open, a few hours afterwards, by the agitation of vomiting, and continued to bleed again till I had almost fainted. The effects of so great a loss of blood I felt for years afterwards.

When I was very young and inexperienced in the profession, having just laid out of my hands Sharp's Critical Inquiry into Surgery, in which I had been reading, that in no complaint (pleurisy excepted) was bleeding more useful than in hernia; I happened to be sent for to a stout man, about fifty years of age, who had been seized with this dreadful disorder, not however in a more violent degree than he had sometimes experienced it before. Towards morning all the symptoms of strangulation were coming on rapidly. Encouraged by such authority as that of Mr. Sharp, I immediately took away about

I shall not take up your time, with endeavouring to refute Mr. Dray's oblique insinuation of presumption, implied in the first part of p. 328; as it does not appear, from any part of my communication, to have been merited: nor shall I cavil about the degree of weight *only*, which he allows to the cases which I selected, from several others of a similar nature. I shall only explain more particularly, some circumstances, to which he has very erroneously ascribed a greater share of the cure in the cases of contusion than they merited. In neither of them was the loss of blood from the contused parts so great as either to promote or retard the cure in the smallest degree. He is equally mistaken, in the effects, which he supposed the calomel to have been given, in the case of pneumonia, or in any of the others, with the view of producing. As mercury, in whatever manner its mode of action is to be explained, has been found to aid the efficacy of other remedies, it is upon the supposition of its increasing, or promoting, the anodyne powers of opium, that I generally prescribe calomel along with it. In injuries from external violence, especially of the head, I have been in the habit of directing the patient to have a brisk cathartic, after the effect of the opiate has ceased, not from any view to evacuation as being at all necessary, but for the purpose of exciting a different action in the system, if that can, in any degree, avert the danger that may be dreaded; this, I allow, may be more imaginary than real; it is only a secondary consideration.

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about twenty ounces of blood from a large orifice, by which he was certainly much relieved; but on the following evening he died, with every appearance of the fatal event having been hastened, if not occasioned *solely*, by the loss of so much blood.

I have lately been induced to inquire more particularly into the effects of "forty to fifty and sixty ounces of blood" being taken away "in a couple of hours," (Medical and Physical Journal, Vol. II. p. 284) and that in dysentery too, in which I have always understood that the lancet ought to be used with caution. Nay, as the author, as well as his assistants and his patients have told me, upwards of a hundred ounces have been taken in the course of a few hours. How many "valuable lives" were not lost by such treatment, can only be inferred from other complaints having been mistaken for, or fancied to have been, dysentery. The result of my inquiry, however, was neither gratifying to my own feelings, nor at all encouraging to adopt this author's practice.

This evacuating plan, incredible as it may appear, is even trifling to that of the Transatlantic practice of physic, (Rush's Medical Inquiries and Observations, &c. Vol. IV.) No matter what the theory is, the author generally contrives to make it correspond to his practice. If the *arteries* are *convulsed*, blood must be drawn to check their inordinate action; or, if the blood-vessels are morbidly distended with "septous gas," an opening must be made to let it escape. The consequences of such practice must appear *obvious* to every enlightened physician, at least on this side of the Atlantic.



I shall not take notice of what Mr. Dray has advanced, respecting the treatment of certain cases of Ague, with any intention of criticising either his opinions on the subject, or his practice; but to recommend to him another remedy, perhaps less objectionable than the cinchona, and, I hope, I am not too sanguine in adding, equally as efficacious; I mean, the broad-leaved willow bark. It will also give me an opportunity of acknowledging to Mr. White, of Bath, how much I feel myself indebted to him, not only for his publication on the subject, but also for the benefit which I have myself experienced from its use.

I have for several years been subject to attacks of a quartan, and which I hardly dread so much as the distressing effects of the Peruvian bark, which it never fails to produce, if I take it in substance, even in very small doses. About two months ago I had a severe attack of ague, accompanied with vertigo, &c. the paroxysms of which were removed by an ounce of willow bark in powder, taken in the course of forty-eight hours; I was also agreeably surprised with finding, during this period, my appetite much increased; indeed, I did not experience a single unpleasant effect, except costiveness, from it. This suggested to me a hint, of the probability of its further utility; I have therefore tried its efficacy in the incipient states of convalescence, to promote the appetite, in a dose of half a drachm, an hour before breakfast, and the same before dinner, and with as much success as could reasonably be expected. I have also experienced the same good effects from its use, in several cases of Diarrhoea; one, of a child seventeen months old, who was very much emaciated from the severity and duration of the complaint. The quantity taken was two drachms of the powder in the space of three days. Though I agree with Mr. Dray, that "a few cases only, ought not to satisfy any practitioner," yet I think they are sufficient encouragement for myself to make further trials of it, and to recommend the same to others of the profession. My own is the only fair case of ague, in which I have had an opportunity of administering it, since I met with Mr. White's publication. It is indeed much to be wished, that its efficacy in curing agues could be fully established, for other reasons than merely that of its making a very valuable addition to our list of febrifuge remedies, or of a great saving being thereby made in the necessary expenditure of public charities. That class of people who are most exposed to the causes of ague, are, in general, the least able to procure the means necessary to obviate either the disease itself or its too baneful effects, many of whom, from such a cause, are yearly lost, if not irrecoverably, at least for a considerable time,

to their friends and the public. It would therefore tend, in some, I hope in no small degree in numerous instances, to alleviate, if not to prevent entirely the accumulation of human misery, from disease as well as poverty, if a remedy could be found growing by the sides of our own rivulets, of equal efficacy with that which we are obliged to purchase at a great price, and from a distant clime, in rescuing no small portion of our fellow-creatures from the clutches of "a meagre fiend," which,

"With feverish blasts, subdues the sickening land."

As I have often witnessed much distress from long continued ague, and the poverty of the patients who were afflicted with it, I am the more earnest, on that account, in recommending trials of the broad-leaved willow bark, as a substitute for the Peruvian, by others of the profession, to whom favorable opportunities for that purpose may occur; notwithstanding it has been so flatly asserted, perhaps on very slight grounds, that, "in point of efficacy, it is in no degree to be compared with the Peruvian bark." (Edinburgh New Dispensatory, 1797, p. 233.)

I shall conclude this letter with a little speculation on the oxygenation of the blood, which, if not well founded, will, I hope, do no harm. This process is generally supposed to be carried on by the oxygen of the atmosphere passing through the moist membrane of the lungs, without any peculiar action on their part, but entirely from its being attracted by the blood. This theory is neither supported by analogy, for here, demonstration is altogether out of the question; nor does it, in my opinion, explain why, under the same atmosphere, the blood of one person becomes superoxygenated, as in synocha, consumption, &c. or suboxygenated, as in hæmorrhæa petechialis, confluent small-pox, &c. or why similar changes take place in the state of the blood in the course of a few hours, in the same person, as I suppose to happen in the cold and hot fit of fever. It may therefore, I think, be fairly presumed, that the oxygenation of the blood, instead of being a mere chemical process, is carried on by an appropriate set of organs, which, from their minuteness, and the office which they have to perform, will ever elude the nicest investigation of the anatomist; and, that it ought to be regarded as one of the animal functions,—that, indeed, on which all the others depend. If this is granted, I can carry my speculations to the production of diseases accompanied with these different degrees of oxygenation, as also to the action of some of the remedies commonly employed. We suppose then, that the cold fit of fever is occasioned by a torpor of these organs, which, from their office, may



may be called *INHALENTS*, whereby the blood is not supplied with its *usual* or *necessary* quantity of oxygen; hence, the death of persons who have died in this stage of fever, may be accounted for, not merely from the heart becoming torpid by association with other parts of the body, but chiefly from a defect of this stimulus in the blood. Upon the same principle, I suppose, that some noxious powers induce disease, by affecting the *inhalents* either primarily, by being *directly* applied to them, as in contagious diseases, pneumonia, &c. or *indirectly* by their association with other parts of the system, as in the small-pox from inoculation, scurvy, fever from external violence, &c. Conformably to this opinion, it is supposed, that those medicines which affect the oxygenation of the blood, act, not by forming a chemical union with either of its constituent parts, or by communicating or depriving it of oxygen, but solely, by increasing or diminishing the powers of the *inhalents*, whether they are applied *directly* through the medium of the atmosphere, as suggested and practised by the justly celebrated and ingenious Dr. Beddoes, or act by association, as exemplified by digitalis, opium, &c. exhibited by the mouth, mercurial frictions, &c. If this doctrine shall hereafter be found to be just, it will become of importance to study, with what parts of the system the action of these vessels is most particularly associated, that we may administer our remedies with better effect, and guard more effectually against the exciting causes of disease. Though this theory has long been the favourite amusement of my leisure hours; yet, I durst hardly have indulged my speculation so far, as to hazard public criticism, had I not met with somewhat of a similar opinion in the great M. Fourcroy's *Memoir on Pneumatic Medicine*, in the 2d Number of your very useful *Miscellany*. I am,

GENTLEMEN,

Your humble servant,

A. HUGGAN.

Plymouth, May 1, 1800.

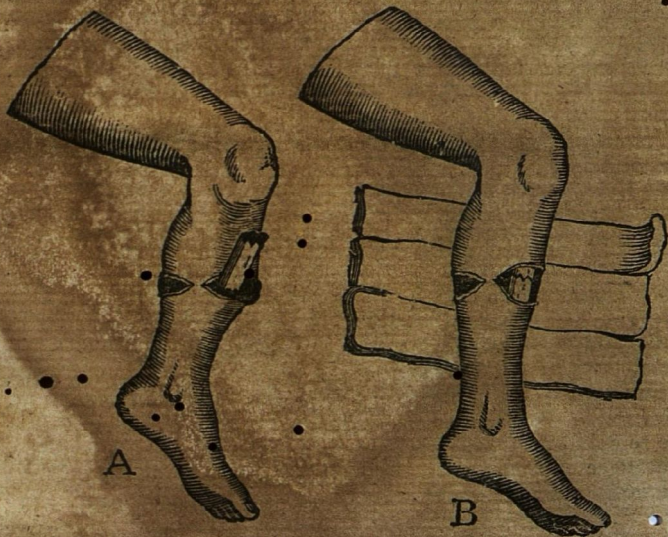
P. S. Since the foregoing letter was written, I have had an opportunity of perusing the 15th Number of the *Medical and Physical Journal*; wherein I find a cynical animadversion on my opinions, in Mr. Christie's communication, p. 455, which I wish to notice, not for any *argument* that it contains, but only to say, that by his sarcastical allusion of *originality*, he gives me more credit, in that respect, than I deserve. I was induced by authority sufficiently respectable, and reasoning that appeared to me, as experience has since proved it, equally conclusive, to choose the lancet entirely. I feel neither so intoxicated with the subject, as to have placed *my own conceits* "in a conspicuous situation," as real matter of fact, or to have given the

the hasty result of a few indecisive trials, as that of steady and attentive experience and observation. Nor need I be deterred from it, by the fullest analysis and comparison of "the materials with the solid structure of truth, of old industry, of extensive experience, of candid reasoning, of ripened talents." This I should rather wish than fear to meet, as I am confident, that neither *cruel disappointment* nor *fatal deception* will so often follow the practice therein suggested, if adopted to the extent which is recommended, as that for which Mr. Christie is equally as strenuous an advocate.

Mr. Dunning's query (p. 439) may be answered in the negative, as one of my cow-pox patients has, about a fortnight ago, had the measles.

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*Case of a Compound Fracture of the Leg, with a considerable Protrusion of the Tibia, successfully treated, principally by the Mode of healing by the first Intention.*  
By J. EVANS, M. D.



ON the 21st of November, 1798, John Vaughan, a boy about eight years of age, being employed in the coal mines in this neighbourhood, at the usual hour of quitting his work,



got into a chain suspended by a rope, in order to be wound up out of the pit, which rope, after passing over a large iron pulley, was fastened to a wooden machine (commonly called a gin) that was moved round by means of a horse; which being under the management of a careless girl, was suffered to carry the child with considerable force against the pulley, the edges of which form a deep groove for the reception of the rope. The boy being unable to free himself, had both the tibia and fibula of his left leg completely fractured, the broken end of the lower part of the tibia protruding upwards for several inches, and the integuments with the muscles were deeply divided in a circular direction round the limb, except a small portion of skin on the inside of the leg, near where the bone pushed out. Had not the horse been fortunately stopped at the moment he was, and the boy extricated from his perilous situation by a young woman who ran to his assistance, the limb must inevitably have been amputated. Being from home at the time the accident happened, Mr. Thomas Dugard, an ingenious young gentleman, a pupil of mine, went immediately to his relief; when, upon his arrival, he found the leg in the situation before described, without much hæmorrhage\*. He directly placed the limb in that position in which the muscles appeared to be most relaxed, by which method he was enabled to bring the fractured extremities of the bone in contact; over which he brought the retracted integuments as close together as he possibly could, retaining them in that situation by slips of sticking plaster, covering the whole with the eighteen-tailed bandage, which was afterwards frequently moistened with a solution of crude sal ammoniac in vinegar. Flexible deal splints were used at the same time, to preserve the proper form of the limb. Opiates were occasionally administered; but as no fever or much tension came on, I did not judge it necessary to direct any opening medicines, especially as my patient's bowels were quite regular. The adhesive plasters were not removed for sixteen days after the first application, at which time they became loose in consequence of a slight discharge. When they were taken away, the wound appeared granulated and united in every part, except where the bone protruded. Dry lint was the only application made use of to the greatest part of the wound during the remainder of the cure; but where the tibia was exposed, a thin piece of sponge was laid over it, with a view of absorbing the matter, which was the means of preventing the limb being frequently

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\* It is well known to men of experience in surgery, that lacerated wounds are seldom attended with profuse hæmorrhage.

frequently disturbed for the renewal of the bandage. In the course of six weeks the callus was so firm, that the child could bear the leg to be lifted up without making the least complaint; and at the end of two months from the time of the accident, was able to move it in any direction, of his own accord. A portion of the tibia exfoliated as far as it was denuded of its periosteum; and a piece of the fibula, which had been broken off, made its way through a part of the wound on the under side of the leg. At the expiration of four months, the boy returned to his usual employ with a well-formed limb, equal in length with the other.

REFERENCE to the DRAWING.

- A. The appearance of the limb immediately after the accident.
- B. The representation of the limb after the ends of the bone were brought in contact.



CRITICAL RETROSPECT  
OF  
MEDICAL AND PHYSICAL LITERATURE  
[ FOREIGN AND DOMESTIC. ]

*Annals of Medicine for the Year 1799 ; exhibiting a concise View of the latest and most important Discoveries in Medicine and Medical Philosophy.* By A. DUNCAN, Sen. M. D. and A. DUNCAN, Jun. M. D. &c.

[ Continued from pp. 482—486 of our last. ]

V. *Observations on the Pemphigus Major of Savages.* By Dr. R. HALL, Physician, Edinburgh.

In a former paper Dr. Hall had given it as his opinion, that Pemphigus is merely a sporadic disease. Some other practitioners believe it to be contagious. "An opportunity soon occurred of submitting this opinion to the test of actual experiment, by the re-appearance of the disease, in one of the two patients who had been subjected to this affection, nearly about the same period, in the preceding year.

"Mrs. H. had, for a few weeks previous to the present attack, been occasionally subject to slight febrile paroxysms, for which bark, &c. had been prescribed, but were never diligently employed.

"Towards the evening of the 28th July, she was seized with giddiness and head-ach, a sense of great lassitude and weakness, with other precursory symptoms of fever. On the following morning, her skin was preternaturally hot; pulse frequent, weak, and irregular; head-ach rather more violent; respiration somewhat oppressed; was thirsty, but not costive; her tongue parched, but not foul. She had passed a restless and uneasy night, and said, that she now apprehended the nature of her disease would prove similar to that which she had experienced last year. In the evening, a single vesicle appeared on the thigh.

"30th. She had been equally restless as on the foregoing night; and to an aggravation of the former symptoms were now superadded, great irritability of the system, and frequent, but irregular shiverings. In the course of the day, five more vesicles made their appearance on different parts of the body.

"August 1. A small one appeared on the exterior part of the meatus auditorius. By the evening of the next day, all the febrile symptoms had suffered a considerable abatement; but she continued, for a few days, affected with much languor and debility; had a slight exacerbation of fever every night, with an evident apyrexia in the morning.

"Towards

Towards the decline of the complaint, an eruption of small pimples came on, especially about the neck and arms, similar to those excited by nettle burning; but which soon went off, without any bad symptom. The disease was mild, in comparison with that it had sustained in the preceding year, and shorter in the term of its duration. The vesicles were few in number, and wholly confined to the external surface of the body. Those that did appear were filled, however, in like manner, with a yellowish serum, and of the same magnitude as on the former occasion. They were painful upon being touched, but the circumjacent skin was not much inflamed. Of two or three that were punctured, she complained a good deal, and observed, that her sensations after the operation were similar, as she conceived, to what would have been felt by her upon the application of any corrosive or caustic matter to the same part of the body. Upon the most diligent scrutiny, I could not discover that any person, either in the town or neighbourhood, had been affected with a similar complaint; nor was the disease communicated to any one, although, both now and in the preceding attack, the patient had, at my particular request, continued to allow a person to sleep with her during the whole period of her illness.

“ Both during the progress, and at the height of the disease some of the fluid with which the vesicles were filled was taken, and with it I inoculated myself and two other persons, in both arms, making three punctures in each arm. In one of the patients on the day after the insertion of the matter, a single puncture exhibited a very slight degree of inflammation; not, however, more than what frequently occurs from a scratch or puncture made with a clean instrument: but neither in this patient, nor in the other two, was any constitutional effect, or the least perceptible indisposition, produced. The result of these attempts to communicate the disease, by inoculation and contact, although not perhaps sufficiently numerous to prove decisive of the question, is at least extremely unfavourable to the hypothesis of those who assert the contagious nature of pemphigus, and tends strongly to support and confirm the negative conclusion.

“ From the foregoing statement it would appear, that the following inferences may be fairly deduced :

“ 1st, That pemphigus is a disease of which persons are susceptible more than once in the course of their lives.

“ 2dly, That the disease originates where no source of infection can possibly be discovered, and seems generally connected with more or less of an affection of the whole system.

“ 3dly, That patients labouring under it may have constant intercourse with others, and yet never communicate the disease to any of them.

“ 4thly, That the disease is not communicable, like the cow-pox or small pox, by inoculation.

“ On the whole, when we comprehensively survey the evidence recorded by recent writers on the subject, as well as that furnished by the present and former cases, we must, I apprehend, be necessarily led



led to conclude, that the pemphigus major of Sauvages is an affection merely sporadic, and not of a contagious nature.

"That the symptoms accompanying one or other instances of this affection, are those which attend febrile diseases, whether inflammatory or putrid, the cases given by Drs. Dickson and Stewart, and the one recorded by Mr. Christie, sufficiently evince. In practice, therefore, it would appear, the most important distinctions are, to ascertain,

"1st, When the fever is of an inflammatory nature, and accompanied with strong and increased action of the vascular system.

"2dly, When the fever has a tendency to the typhoid type; is marked by great debility, and symptoms which denote a tendency of the fluids to putrefaction. In the first case, it will be obvious, that evacuation and other antiphlogistic remedies, suited to the nature of the case, will be proper. As, on the other hand, in the second, it will be equally necessary to shun all evacuations, and to employ those remedies alone which support the strength, and give tone and vigour to the system.

"From the whole concourse of symptoms, in the present, and in the two cases of this affection formerly communicated, we are naturally led to infer, that the disease, in a great measure, depended on a certain state of debility, and a tendency of the fluids to putrefaction.

"The general indications of cure thence deducible are sufficiently obvious.

"In the case now under consideration, on the first accession of the complaint, when the skin was hot and dry, a mild antimonial was exhibited, in order principally to excite a gentle diaphoresis; but its use was soon discontinued.

"Afterwards, opiates combined with vitriolic æther were found very useful in diminishing the effects of irritation, and in promoting the determination to the surface. The bark and other tonics, particularly the nitrous acid, in a state of proper dilution, were early administered, and proved very effectual in obviating the effects of debility. By these means, and the ulterior employment of other auxiliaries, the health of the patient was speedily re-established."

VII. *History of a Case, terminating successfully, in which an inverted Uterus was extirpated.* By Mr. ALEXANDER HUNTER, Surgeon, Dumbarton.

We pass over the first part of this case, and only present our readers with the conclusion.

"When the womb first came down, it was nearly of the size of a small pine-apple, and felt hard. The second time it was smaller, but still harder. Before returning it into the vagina, a trial was always made to reduce the inversion of it; but after the first time, the fundus was only dented by any force that could be used.

"The prospect before the patient was now deplorable. The restoring

restoring the uterus was absolutely impracticable; and, if allowed to remain in its present situation, it must be very distressing.

"About a fortnight elapsed in this way, when a new set of symptoms took place. A discharge of a thin watery nature began to flow from the whole surface of the womb, which gradually increased in quantity, and became so extremely foetid, that it was very disagreeable to enter the room. And, though great attention was bestowed, the bed was always wet. Her strength was soon much reduced. And, notwithstanding a liberal use of bark, elix. vitriol. and port wine, severe hectic attacks came on.

"In this state of the business, no plan could be figured for saving the patient, without amputating the uterus. Every endeavour I had used for procuring information, either from medical men or books, left me still in the dark; as in every case of inversion mentioned, not one was to be found, where the patient had survived for any time, unless the womb was directly returned. But, after considering that the organ was not immediately necessary to life; that very extensive wounds, even in the distended state, had been made without any ill symptoms; and that, in its present situation, the funi were for ever destroyed; indeed, that it was now only a burdensome mass; and the woman herself wishing eagerly to be relieved from the miserable way she was then in, it was determined to extirpate it.

"I began the operation by fixing a strong ligature on the neck of the tumor, close to the os externum. But being fearful of spasmodic affections from this compression, I waited six hours without proceeding further. During all that time, however, no complaint was made, no pain was felt.

"With a scalpel the whole uterus was then cut off, close to the ligature. Still neither symptoms of pain, nor even uneasiness, were perceived. And, I believe, the operation was over before the patient knew it had been begun. She was then laid to rest, and an opiate administered.

"During the night she slept well; and, next morning, was very much refreshed. The hectic symptoms went off; her appetite returned; and, in fourteen days, she was able to get out of bed. At the end of a month she was perfectly recovered.

"Since that time she has enjoyed a very good state of health; except now and then some touches of hysteric head-ach, and sometimes stitches and plethoric symptoms in the spring and summer months. She does not menstruate, although still a young woman. She has a tendency to obesity, and even all her precautions cannot counteract it.

"From what happened in the preceding case, it will probably be allowed, that the womb, when not in an inflamed state, may be handled, or even wounded, without pain; that the whole of it may be cut off without injury; and that, in case of inversion, attended with severe flooding, if the womb cannot be returned, the hæmorrhage may be prevented, by tying a ligature round the neck of the uterus,



"Some months after this case happened, I gave the uterus to Dr. Jethray, of Glasgow, who, I believe, still has it."

XII. *Observations on the Benefit derived from the Application of cold Water, in cases of Scarlatina Cynanchica.* By Dr. GEO. MOSLEY, Physician, Bradford.

"A boy, eight years of age, on the 31st of July last, was seized with great lassitude, with rigors, succeeded by extreme heat, thirst, sore throat, and every symptom characteristic of that species of pyrexia denominated *Scarlatina Cynanchica*.

"On the following day, the apothecary to the family was consulted, and prescribed an emetic, which operated well. He was then directed an aperient solution, which procured him several evacuations, without any abatement of symptoms.

"On the morning of the 2d of August, when I visited him, the whole surface of his body was covered with a scarlet eruption. His tongue was dry, and exhibited a fur approaching to black; the internal nares were considerably tumefied, and were of a deep red colour; his face had the appearance of an incipient suffusion upon the tunica albuginea; his pulse beat 135 strokes in the minute; his urine was scanty, and singularly pale.

"I had not an opportunity of applying to him the thermometer, but his skin felt intensely hot.

"Previous to the occurrence of this case, I had perused Dr. Currie's admirable treatise on the use of cold water in fevers. As I have been in the habit, for several years past, of exhibiting and applying cold liquids in almost every case of pyrexia, the practice was not new to me. But Dr. Currie's mode of application is different from mine. He directs the patient to be taken out of bed, during the hot stage, and to have water thrown upon the whole surface of the body. I have constantly recommended cold vinegar, or vinegar and water, to be applied, at the period specified, by means of a sponge.

"The effects produced upon the system by Dr. Currie's method and mine, are precisely similar; and I am confident, from an enlarged experience, that, if it be possible to render the phenomena of fever less formidable, or to arrest their progress, the application of cold water is the instrument to be employed.

"It is true, that the popular prejudice against the exposure to cold in the hot stage of fever is remarkably strong, and I have found much difficulty in combating the error. When I once succeed, however, in persuading any patients to make the experiment, there needs little art to induce them to repeat it. The use of cold fluids is so refreshing to them, and produces so complete a solution of the intense heat and restlessness under which they labour, that upon every recurrence of similar phenomena, they are eagerly solicitous for the same grateful application.

"The father of the boy whose history I now relate, is a well-informed man, and I found little difficulty in obtaining his sanction to a practice which was deemed conducive to the restoration

of his child, and which might probably obviate the danger of contagion in a very numerous family.

"When I first visited my patient he was under the influence of the hot stage, and there appeared not the smallest tendency to its solution by perspiration. I therefore introduced into his chamber a free current of air. I then directed him to be placed in the middle of the floor, and the whole surface of his body to be sponged with cold vinegar.

"I saw the operation performed; and although he was at first much averse to it, yet he felt it so cooling and refreshing to him, that he never afterwards objected to a repetition of the experiment. The attendants, therefore, had recourse to the application as often as he felt hot, or appeared to them to be so, and with the most beneficial effects. But they had the strictest injunctions not to hazard the application when he had the least chilliness upon him, or when there was the smallest tendency to perspiration. In either of these cases, I conceive the practice to be highly dangerous: but during the hot stage of fever, I have uniformly found that the application of cold liquids reduces the frequency of the pulse, and increases its strength. It has also a wonderful effect in obviating the tendency to delirium, in diminishing thirst, in increasing the efflorescence of the skin, and in inclining it to a gentle moisture.

"In the present case, these effects were strikingly exhibited indeed.

"From the apparent violence of the attack, and the early period at which the most alarming symptoms made their appearance, I had every reason to prognosticate the approach of delirium, accompanied by those phenomena which precede the last catastrophe. On the morning, however, of the fourth day of fever, I found that he had had a good night, and was then very composed. His tongue was moist; his pulse reduced to 120 strokes in the minute; his skin felt soft, and the febrile heat was much diminished.

"I should have observed, that from the first of my attendance, I had directed him to have a table spoonful every hour, of equal parts of *aq. ammon. acetat. et aq. fontan.* And attendants were instructed to give him a spoonful or two, occasionally, of the opening solution already mentioned, so as to keep the bowels in a state of solubility. His common drink was cold water.

"This morning there appeared a little sloughiness on the tonsils; and I ordered him a gargle with *mel. ros. et bordeat.* acidulated strongly with the nitrous acid. The cold applications were constantly used on the approach of the hot stage; and to each dose of his julep a few grains of nitre were added.

"During the whole of this day he continued to derive relief from this practice, and on the morning of the 5th his urine was nearly of the colour of bright water. His tongue was clean and moist; his pulse 105; the sloughs in his throat had disappeared; and from this period he recovered rapidly.

"Seven of the family were successively seized with the same species of



of fever; and, by a similar treatment, were all speedily restored to the most complete health.

"In one of the cases, the most serious consequences were manifestly combated successfully by the practice described. In no instance was the fever protracted beyond the 5th or 6th day.

"I have thus sketched the most prominent features of a solitary case of scarlatina, cured by the use of cold applications; and were it necessary to establish the efficacy of the practice, I could adduce a very considerable number.

"During my attendance on this family, I caught the contagion. The symptoms of scarlatina were distinctly and rather strongly marked; but by the timely application of a shower-bath, twice a day, the febrile affection was speedily removed. I took no medicines.

"If the good effects of this practice be deducible from the cold produced by the process of evaporation, are there not other applications which would more effectually and powerfully accomplish the object proposed?"

*XI. Medical Cases; by JOHN HAXBY, Physician, Pontefract.*

3. A case of enlargement of one of the spinal vertebræ, gradually disappearing on an enlargement of the trochanter major of the right thigh, which was succeeded by hydrocephalus, terminating fatally.

"W. S. aged nine years, had for some time laboured under immobility of the lower extremities, with constipation of the bowels, and a degree of dysuria; owing to an enlargement of one of the spinal vertebræ.

"Caustics were applied to each side of the prominence, and kept open some time; during which there was a slight alleviation of his complaint. But as the amendment was not in proportion to his expectation, nor equivalent to the sacrifice of his ease from the irritation of the caustics, about two months after their insertion he allowed the ulcers to heal.

"Very soon after this, the trochanter major of the right thigh bone began to be enlarged; and in proportion as it increased in bulk, the diseased spinal vertebra was diminished, till at last there was no inequality in the appearance of the spine.

"The trochanter continued to be enlarged for about a month; though great pains were taken to reduce the swelling by friction with spirituous embrocations, which was at length effected; and now he could walk with perfect ease, as far as could be expected from his reduced strength; but he soon began to complain of pain in his head, which became more and more violent, so that when I saw him, (which was about a week after it had come on) he appeared to have every symptom of hydrocephalus internus, except strabismus, which supervened in a day or two, when he died.

"Was the hydrocephalus, in this case, at all connected, as cause and effect, with the previous enlargement and subsequent diminution of the trochanter major and spinal vertebra?—Would the timely re-insertion of the caustics have prevented hydrocephalus?"

This volume contains a variety of other important cases and hints, for which we must refer our readers to the work itself. As memoranda in the *Materia Medica*, we notice a case of tetanus\* cured by the liberal use of wine; a case of epilepsy cured by musk and opium; cases of croup cured by hydrarg. muriat. mitis, and by the polygala seneca.

*A brief History of Epidemic and Pestilential Diseases, with the principal Phenomena of the Physical World, which precede and accompany them, and Observations deduced from the Facts stated.* By NOAH WEBSTER, Member of several American Societies, &c. 2 vols. 8vo. pp. 1301. Price 18s. in boards. London, Robinsons, &c.

This comprehensive and elaborate work commences with an account of the diversity of opinions respecting the cause and origin of pestilence. The author then presents his readers with historical views of pestilential epidemics, and the phenomena in the physical world which preceded, attended, or followed them, from the earliest accounts down to the year 1798. These subjects occupy the first volume.

The second volume begins with a tabular statement of the bills of mortality for the two last centuries, which the author introduces thus:

“ Our accounts of diseases and the phenomena of the world, which appear to be connected with them, are altogether imperfect. But in the two last centuries we have a tolerable history of diseases, and occasionally an account of the seasons and remarkable occurrences. In the following tables the reader will find the bills of mortality for London, Augsberg, Dresden, Boston, one church in Philadelphia, with the bills of a few years for Paris and Dublin; to which are prefixed such of the remarkable phenomena of the elements as I have been able to collect.

“ As winter makes a part of two years, the word *severe* is set against the year in which the winter began. Thus, against the year 1607, the word *severe* refers to the winter of 1607-8. The blanks denote, either that nothing singular occurred in those years, or that I have no account of the occurrences. Further inquiries might enable me to fill many of those blanks.

“ Bills of mortality do not exhibit a complete view of epidemics, as some of the most remarkable, especially influenza, destroy but few lives; and the bills of the years when that disease alone prevailed, are remarkably low. It is often the immediate precursor, in spring, of pestilential diseases in autumn, in which cases the bills of the year are very high.”

The second volume also contains remarks on the tables; on pestilential periods; influenza; on the order, connection, and progression of pestilential epidemics; on the extent of a pestilential state of air; conjectures on causes; means of prevention, &c.

\* See Foreign Literature, p. 569.



*Considerations regarding Pulmonary Consumption.* By THOMAS SUTTON, M. D. Member of the Royal College of Physicians, and Physician to the Forces; 8vo. pp. 120. London, Robinsons.

The leading objects of Dr. S. in this pamphlet appear to be to invalidate the common opinion respecting the cause of emaciation and death in phthisis. Observing that many patients die of this disease, when attended with very little cough or expectoration, and certainly with no marks of purulent expectoration, he concludes that the symptoms often depend on some other cause. In such cases, he thinks the cause of death "is such a decrease of the stimulating quality of the blood, as at last to render it incapable of continuing the circulation. This inference is supported by the appearance of the blood drawn, which contains a very small proportion of crassamentum."

At p. 19, Dr. S. gives the following opinion, viz. "It may not be improper, in this place, to state an opinion regarding the source of those happy feelings, high spirits, and that constant hope of a favourable termination of the disease, which have been observed to attend consumptive patients.

"Pleasant and exhilarating sensations are, I believe, common to all persons under a certain state of debility from disease unconnected with uneasy feelings. They may be occasioned by the common stimuli of intellectual exertion, of the circulation of the blood, of food, &c. upon the debilitated body; as it is evident, that the same stimulus has a greater effect upon persons debilitated by disease, where no powerful agent continues to occasion further debility, than, *cæteris paribus*, upon those who are in health. I have experienced such sensations after two severe fits of typhus fever, when, being very debilitated, I had the same pleasurable sensations (Dr. Darwin's expression) as if I had been in cheerful company in health, and had drunk moderately of wine. But striking instances of such effects from debility are observed by medical practitioners, in patients who have been tormented by inflammations in the bowels, which have ended in gangrene. In such cases, it has often been observed that patients are in remarkably good spirits, and cannot be readily convinced that they are in any danger. These feelings are occasioned by debility, brought on by sickness, pain, want of sleep and of food, which is acted upon by the common stimuli of intellectual exertion, of food, of the circulation of the blood, &c. and have the effect, in the way related, of producing a considerable degree of cheerfulness, though unhappily of short duration. This cheerfulness and hope is more observable in phthisical patients, because the disease is of considerable duration, and because the debility gradually increases; and the patients, at least ten hours in the day, are, during the greater part of their disease, free from uneasy sensations. But, while affected with pain, or tormented with the irritation of heat in the night, paroxysms of hectic fever, there is no more cheerfulness and resignation in them, than in people labouring under equally unpleasant sensations in other diseases."

In Section IV. the author states his own cause of phthisis, which

is, an obstruction in the mesenteric glands. This hypothesis he supports by cases, and reasoning. We believe with Dr. S. that *tubercles mesenterica* and phthisis are often combined; but we also believe that they may exist independently of each other, which he appears to doubt; for, at p. 31, he says: "Hence it appears to me, that phthisis pulmonalis is caused by a disease in the mesenteric glands, and that the tubercles in the lungs, and some other of its symptoms, are excited by sympathy."

Sect. VI. contains "General observations respecting the action of sympathy in consumption. VII. Predisposition. VIII. Cause of emaciation and debility. IX. On hectic fever;" the cause of which Dr. S. believes to be "an obstruction of the perspiratory organs arising from the defective circulation."

XIII. *On the Cure*. When Dr. Warren looked into any new medical work, which he had seldom leisure to do, he first examined the method of Cure; and if he found nothing new there, he searched no further. Our author recommends the usual remedies, though he explains their operation somewhat differently from his predecessors. Emetics seem to be his favourites, as they were of Drs. Sydenham and Reid.

The pamphlet is concluded by an Appendix, containing ten Cases, examined after death, which tend to confirm the author's opinions.

Though we observe several inaccuracies, and what we deem errors, in the above work, we are nevertheless convinced that it is well calculated to improve the theory and treatment of this important disease.

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*A Short Account of the Infectious Malignant Fever, as it appeared at Cambridge, and its vicinity, in the Summer and Autumn of the year 1799; with a detail of the good effects of Yeast and Vital Air, in the different stages of that Disorder.* By a MEDICAL PRACTITIONER. 8vo. pp. 50. price 1s. 6d.

We are sorry that the ingenious author of this pamphlet has not given his name to it; for medical facts generally require all the aid they can derive from the authentication of a name.

The disease appears to have been the cynanche maligna in its worst form, and highly contagious among the poor. The symptoms agree with those described by other writers, but in the cure the author says:

"The manner in which I have usually administered the yeast, has been, by putting a tea spoonful, or more, according as it agreed with the stomach, into a quart bottle, and filling it up with mild porter: of this the patients took a glass full, every hour, or oftener, if they were thirsty.

"I have found it particularly useful in a great number of cases; and, therefore, I cannot avoid recommending it as a most powerful antiseptic, in malignant fevers. I have generally given it from the beginning, and persisted in its use, till a restoration to health took place.

"But



"But there is another remedy, not usually recommended in this disorder, that I have found particularly serviceable, *viz.* the oxygen gas, or vital air, inhaled into the lungs; it does not appear proper at the beginning of the fever; but, when the symptoms of debility come on, and the eruption assumes a dark purple colour; then, I found a frequent exhibition of it to alter that appearance surprisingly.

"When I first used the vital air, I prepared it from the black calx of manganese; but finding the process took up more time than I could conveniently spare, and observing the difficulty there was in inducing a patient to sit up in bed to inhale it, I make use of the following method, which is much more simple, and answers equally well, without occasioning the patient any fatigue, or giving the attendants unnecessary trouble.

"I first cause the doors and windows of the sick person's chamber to be closed; and then, taking a chafing-dish with some live coals, throw into it half an ounce of purified nitre in powder, which immediately fills the room with a thick, white cloud, that continues wafting about for a considerable time.

"On examining a patient, during this operation, I never fail to find that it increases the pulse; and, however low it may be, does, for a time, give it a degree of vigour and energy. In a few minutes more, the difficulty of breathing diminishes; the blood vessels of the cheeks and lips become of a more florid hue; and a gentle perspiration breaks out on the skin.

"This process I direct to be frequently repeated, in the course of the day, and I have seldom seen it regularly persevered in, without producing decided benefit."

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*An Essay on the Analysis of Mineral Waters.* By RICHARD KIRWAN, Esq. F. R. S. &c. 8vo. pp. 279. London, Bremner. Price 7s.

Such is the well earned celebrity of Mr. K. as a chemist, that it is sufficient merely to announce the subject and the author, in order to secure readers.

The term *mineral waters* is specially applied to such waters only as are distinguished, by a peculiar colour, taste, smell, or other obvious property, from common spring, lake, river, or other water, fitted for economical uses. Mineral waters thus understood, have long attracted the attention of mankind by their medicinal powers. These, indeed, can properly be inferred only from their repeatedly experienced effects; yet, even with this restriction, the knowledge of their contents must be deemed highly important, not only for the purpose of imitating such as are found beneficial, in countries where Nature does not afford them, but also for the purpose of discovering the medical powers, and mode of action, of certain ingredients taken in a certain proportion, and a given degree of dilution, with a long train of consequences that may in time be deduced from this knowledge. There are also many other points of view, in which an acquaintance with the contents of mi-

neral waters must be deemed of importance; and we are convinced that the subject could not have fallen into more able hands.

The work is divided into Two Parts. In the first part is contained an account, 1. Of substances found in mineral waters. 2. Of the tests of those substances.

The second part treats of the analysis of mineral waters, viz. 1. Of the *common method*, by tests, evaporations, crystallization, solution, precipitation, &c. to each of which Mr. K. states his objections. 2. The new method, by determining the existence and quantity of elastic fluids, by estimating the solid and liquid ingredients. 3. The use of spirits of wine in the analysis of mineral waters. 4. Tables, 1, of the quantities of real acid in mineral acids; 2, of the quantities of acid absorbed by different bases; 3, of the quantity of each base absorbed by each acid; 4, of the proportion of ingredients in neutral salts; 5, of the length in feet of a column of common air at different barometrical heights and different temperatures. 5. Appendix, containing new experiments on various saline solutions.

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*Medical Facts and Observations*, Vol. 8. pp. 240. 4s. 6d. Callow.

The public are indebted for the present, as well as the former Volumes of this useful Publication to Dr. Simmons, a gentleman long eminent for his learning and abilities. As this collection of papers holds an equal rank with the preceding, for curiosity as well as interest, it will be in the hands of every person who is anxious for the improvement of medicine and surgery; little therefore need be said in recommendation of it. This volume contains twenty-three papers, any of which might be selected for the entertainment of our readers; but we choose the following case, as it may tend to diffuse the knowledge of a remedy, for a very distressing complaint, which may be easily obtained and administered by every one.

"Ann Fuller, a single woman, aged forty-two years, has, at different times, in the course of the last five or six years, laboured under a suppression of urine; and in some of those attacks, no urine passed from the kidneys to the bladder for ten or twelve days each time; the catheter having been repeatedly introduced to determine this fact.

"In the years 1764 and 1795, she was confined to her bed seven months in a state of great agony. The pain extended across the loins, and down the course of the urethra, and was frequently attended with violent and long continued vomiting of blood. In the course of this attack, the left ureter might be felt distinctly in the groin, enlarged to the size of a hen's egg, and extremely painful when pressed. This was evidently occasioned by the pressure of calculi, which she afterwards voided in great numbers, with blood in considerable quantities, frequently half a pint at a time, without any mixture of urine.

"For her relief a variety of remedies was had recourse to, such



as repeated bleeding and warm bathing, saline purgatives, emetics of different kinds, camphor and opium in large doses, uva ursi, mephitic alkaline water, &c. To the camphor, combined with opium, which brought on a copious diaphoresis, she was more than once indebted for a mitigation of her painful symptoms. The mephitic alkaline water was tried repeatedly, in different forms, plain, and with additions, cold and warmed, but it constantly occasioned pain of the stomach and vomiting.

"At length, the hæmaturia continuing, accompanied with a good deal of pain, and every remedy that had been administered having failed to relieve her effectually, Mr. Gabriel Allen, my assistant, suggested to me a trial of a decoction of peach leaves, from which he had occasionally seen good effects in cases of nephritis. He was first led, it seems, to the use of this remedy by a person, not of the medical profession, who was much resorted to by patients labouring under complaints of this kind, and who made a very successful use in such cases, of an electuary, composed of honey, and peach leaves dried and powdered; together with a decoction or infusion of the leaves.

"After having seen so many other remedies fail in this case, I was anxious to try the effect of this new medicine. I say *new*; for, although different writers on the materia medica mention the anthelmintic properties of the leaves, and likewise of the flowers, of the peach tree, I do not find that any of them have noticed their effects in affections of the urinary passages.

"A decoction was accordingly prepared, by boiling an ounce of dried leaves of the peach tree, (*Amygdalus Persica* Linn.) in a quart of water, till it was reduced to a pint and a half. Of the strained liquor she took a pint daily, and at the end of thirty hours after she began the use of this remedy, she voided clear natural urine, and in a few days recovered.

"From that time she has constantly kept by her a quantity of the dried leaves, and on the least return of the symptoms has had recourse to the decoction again. Since that period, she has had several slight returns of gravel, and has even passed some small calculi, but she has had no return of the hæmaturia. Her present comfortable state of health she attributes to the use of the decoction of peach leaves; at any rate, it seems to be deserving of a trial in similar complaints. I have tried it in a variety of instances besides the one which is more particularly the subject of the present letter, and I am deceived if it is not a medicine of considerable efficacy in complaints of this kind. Upon these grounds it is that I have ventured to recommend it to your notice."

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*Observations on the Effects of various Articles of the Materia Medica, in the Cure of Lues Venerea: illustrated with Cases.* By JOHN PEARSON, Senior Surgeon of the Lock Hospital and Asylum, and the Public Dispensary; Reader on the Principles and Practice of Surgery. pp. 200. 4s. 6d. Callow.

This work is extremely well calculated to calm the agitation in the minds

minds of those, whose opinions have been unsettled on the treatment of the Venereal Disease, since the introduction of the new remedies. The situation the respectable author has long held, gives him full claim to the confidence of the public; and the work evidently shows, that it is the production of a mind well adapted for careful observation and sound judgment. The author has given us a candid examination and estimate of the confidence to be placed in the effects of the *lignum guaiaci*, *radix chinæ*, *radix sarsaparilla*, *mezereum*, *cinchona*, *opium*, *cicuta*, *sassafras*, *juniperus*, *bardana*, *saponaria*, *dulcamara*, *juglans*, *lobelia syphilitica*, *astragalus exscapus*, *ammonia præparata*, *terra ponderosa salita*, certain preparations of mercury, mercurial fumigations, and vitriolic, marine, and nitrous acids. In the chapter where the author inquires into the ill effects that sometimes attend the exhibition of mercury, we select with pleasure the following just and manly remarks.

“ Indeed, I am so far from feeling alarmed or perplexed, at the examples of ill success which occasionally attend the exhibition of mercury, or from considering these misadventures as reflecting disparagement or disgrace on that mineral, that I am rather surprised at the success which so often attends the indiscriminate use of it.

“ There is a description of men who scatter abroad their crudities very liberally, in compendiums and essays; a class of productions seldom calculated to convey information, but principally designed to perform the office of a midwife, by bringing their compilers into public view. With the spurious intelligence collected from these retailers of scraps, many people furnish themselves with a stock sufficient to undertake the cure of their own complaints; and, not uncommonly, impart the precious commodity to others who are less learned than themselves.

“ That mercury, conducted by men of such endowments, should often fail of doing good, nay, that it should frequently inflict great mischief, would be according to the natural order of things: but, that it should ever prove finally beneficial, ought certainly to redound to the credit of a medicine, whose salutary agency cannot be invariably frustrated by all the blunders of hardy ignorance.

“ He who shall discard all general rules, because they admit exceptions, ought, likewise, for the sake of consistency, to renounce all science, because human knowledge is fallible and imperfect.

“ My opportunities of administering mercury have not extended to less than twenty thousand cases; and I feel myself fully authorised to assert, that it is a remedy always to be confided in, under every form of lues venerea; and, where we have only that one disease to contend with, that it is a certain antidote, and, as safe in its operation as any other active medicine drawn from the vegetable or the mineral kingdom. Let me not be misunderstood here, as if I meant to say, that it is a certain and safe remedy in the hands of any one who undertakes to dispense it. Quite the contrary:—for a multitude of indisputable proofs might



be adduced, that ignorance and error often render it one of the most precarious and mischievous medicines in use."

We cannot refrain quoting the following useful caution:

"Many persons have taught, that during a course of mercurial inunction, it is unnecessary to continue the friction until the ointment be absorbed; and that the same medicinal effects will be obtained, by merely spreading it over the surface of the skin, as by the more laborious process of rubbing it in as completely as possible. Nothing can be more at variance with truth than this instruction; nevertheless, a doctrine so peculiarly grateful to the feelings of indolent and irresolute patients has not failed to acquire considerable currency. I do, however, most strenuously protest against this slovenly and insufficient mode of applying the ointment; a mode which must finally end in the injury of the patient, and the disgrace of the surgeon. But I do not think it sufficient simply to oppose so delusive and dangerous an opinion, without urging it as a matter of no inconsiderable importance, that the patient himself ought always to perform the friction."

"There may be circumstances indeed, under which an imperious necessity may constrain the violation of this precept; but, whenever it is infringed, it is always at the peril of the patient's safety, unless the assistant conduct it with an accuracy and dexterity which is seldom possessed by those who undertake this disgusting office. Many instances have fallen under my notice, where the ill success of the surgeon could be manifestly traced to this source; and where a compliance with the advice I have now suggested has been immediately attended with the desired effect."

At the end of the work the author has drawn up some general conclusions, which are too valuable to withhold from our readers.

"1. The guaiacum, sarsaparilla, mezereum, walnuts, opium, and Peruvian bark, have often removed some of the primary and secondary symptoms of lues venerea, and have alleviated others. They are likewise each of them capable of removing certain sequelæ of lues venerea, where the further administration of mercury would prove injurious. Yet, no satisfactory series of evidence can be adduced, demonstrating that any, or all of these vegetables, given singly, or combined, are competent to the eradicating of lues venerea from the animal body."

"2. It must be conceded, that certain indubitable symptoms of syphilis have disappeared, during a course of the vegetable remedies; but the same symptoms have generally re-occurred, even at the very time when the patient was taking largely of the medicines which had produced this temporary benefit. Even where the patient has remained apparently well during five or six weeks, the disease has nevertheless always returned; and, what is worthy of particular attention, the same symptoms precisely have re-occurred, which had been seemingly cured during the administration of the medicines alluded to. This fact may be considered as a proof, that venereal symptoms are not cured by them in any proper sense; because local appearances admit of a perfect cure by a mode of administering

administering mercury, which shall nevertheless be insufficient to secure the constitution.

" 3. The muriated barytes, and two of the mineral acids, when given to venereal patients, have the power of suspending, for a limited time, the progress of the disease, and of removing many secondary symptoms; but they are not equal to the subduing of the virus, and freeing the constitution entirely from the effects of that destructive malady. They may likewise be employed with great advantage in those phagedenic ulcers of the genitals, and of the groin, which may be classed among the sequelæ of syphilis.

" 4. The nitric and nitrous acids have removed both the primary and secondary symptoms of syphilis; and, in some instances, it seems, that the former have not recurred, nor have secondary symptoms appeared, at the period they commonly show themselves when the cure has been imperfect. But, as far as my own experience extends, and that of many respectable friends, who are connected with large hospitals, a permanent cure has never been accomplished by these acids, where secondary symptoms have been present.

" The same acids, when exhibited with the utmost care and attention to many patients labouring under the primary symptoms of the venereal disease, and where they have agreed perfectly well with the stomach, have been nevertheless, found inadequate to the cure of those symptoms. Indeed, the failures which have occurred, both in my own practice and that of many of my surgical friends, have been so numerous, that I do not think it eligible to rely on the nitrous acid, in the treatment of any one form of the lues venerea.

" But, while I am obliged thus to detract from the supposed merits of the nitrous acid as an antidote against lues venerea, I would by no means wish to see it exploded as a medicine altogether useless in that disease.

" Where an impaired state of the constitution renders the introduction of mercury into the animal system inconvenient, or evidently improper, the nitrous acid will be found capable of restraining the progress of the disease, while, at the same time, it will improve the health and strength of the patient. On some occasions, this acid may be given in conjunction with a course of mercurial inunction; and it will be found to support the tone of the stomach; to promote the appetite; to determine powerfully to the kidneys, and to counteract in no inconsiderable degree the effects of mercury on the mouth and fauces. These advantages are by no means unimportant; and certainly entitle the gentlemen who have been active in promoting the introduction of this acid into general practice, to the gratitude of the public.

" I will not presume, however, to assert, that we have yet learnt all that can be known, of the best mode of exhibiting this medicine; nor will I suppose that we have arrived at the *ne plus ultra* of its virtues. Yet, in the present state of our information



upon this subject, it would by no means be warrantable to substitute the nitrous acid in the place of mercury, for the cure of venereal complaints; nor to permit the knowledge we have gained respecting some useful properties of the former, to seduce us to reject what a long course of experience has taught us of the certain efficacy of the latter."

## FOREIGN MEDICAL LITERATURE.

### AMERICAN.

We have received the New York Medical Repository, up to January last, from which we extract the following Articles:

*A Dissertation on the bilious malignant Fever which prevailed in the Country adjacent to Dartmouth College, New Hampshire, in the Summer of 1799; by LYMAN SPALDING, M. B.*

"In the cure of this fever, some hurtful and many useless applications were made. It was not in the least effected by those applications which are most extolled in the fevers of our climate. Most of the practitioners had never seen it before, and those who had, from motives of prudence, were unwilling to acknowledge its identity with that of Philadelphia.

"On the first attack an emetic, administered in small doses, to operate cathartically, relieved the symptoms. The effervescing mixture given in the hot fit gave universal relief. New beer and acefcent potations were highly grateful.

"Calomel, joined with other cathartics, was much used. Blistering, and mercurial unguent rubbed over the whole body, were useful.

"Cold air was highly grateful, and eagerly sought for. To establish a current of air through the room was of the first consequence: all the windows and doors were kept open, and the air put in motion by fanning. The rooms were constantly moistened with vinegar, or vinegar and water. Cleanliness was of the first consequence: the patients were frequently washed all over with vinegar and water, accompanied with friction. A solution of muriate of soda was sometimes made use of. Putrid stools were instantly removed, and the stench corrected. All unnecessary apparel and furniture were removed.

"But the most dependence was placed upon the cold bath, when the hot fit was on. This infallibly gave instant and astonishing relief, rendering the paroxysms shorter and milder. It was applied either generally or locally, as the urgency of the case required: this was determined by the surface that appeared unusually hot. When the heat was partial or local, a corresponding bath was used.

"The

"The cold bath was generally applied, by laying the patient naked upon a thick blanket, then sprinkling him and the blanket with the coldest water: the wetted blanket was wrapped around him, and suffered to remain till it became warm; when it was thrown off, and sprinkled a second time; thus reducing the heat of the body to the standard of health. The cold bath served only till the crisis of the fever; afterwards it was as distressing and painful as heretofore it was invigorating and pleasant. Many patients have been injured by a continuation of the bath after the crisis. Washing the hands and face in cold water was grateful.

"Bleeding did not produce that good effect which we had been taught to expect. I am supported in the opinion by physicians grown grey in the use of the lancet, that it was, in every instance, in all stages of the fever, *evidently injurious*. Neither was it found necessary to procure any sudden evacuations; for *here* the disease scarcely terminated in the same number of weeks as hours at Philadelphia. Warm bathing was hurtful, except to the cold extremities.

"Nitre, and other refrigerants and febrifuges, had no lasting effect; opiates had not, till after the crisis, neither had bark: this was now used with a liberal hand. A watery diarrhoea was the most troublesome and pertinacious symptom.

"The *chief indications* of cure, as delivered by my worthy friend Dr. Smith, in his course of lectures on the theory and practice of physic, are, to regulate the heat of the body according to the standard of health, and supply the system with such substances as readily yield carbone."

*A Case of Tetanus cured by Wine; by Dr. D. HOSSACK.*

"On Tuesday, March 13, 1798, about one o'clock P. M. I was called to visit a mulatto servant woman of John Harrington, Esq. of this city. I was informed that about an hour before, while engaged in washing clothes, she had pricked herself with a pin in the wrist of her right arm. The part at which the pin entered was upon the inside of the wrist, immediately over the connection of the radius with the carpus.

"The pin was instantly removed, and, finding no inconvenience from the accident, she returned to her employment. In a short time she felt a great degree of soreness in the part which had been injured, with pain shooting occasionally to the arm, shoulder and neck. These symptoms, in a few minutes, were succeeded by stiffness about the throat, difficulty of swallowing, some interruption of her speech, and, at length, a locked state of the jaws, attended with a spasmodic contraction of the muscles at the back part of the neck, and occasional subultus tendinum, with some coldness of her extremities. In this situation I found her.

"She was naturally of a delicate and irritable habit of body, and had been much subject to hysterical complaints and fits of fainting, which were sometimes induced by the most trifling causes. Her ir-

ritability



ritability of habit was also at this time probably increased; having but three months before borne a child, which she was then suckling.

"Although I have been long since convinced of the insufficiency of opium in the cure of this disease, in the hurry of the moment I gave her about sixty drops of laudanum, in a small quantity of wine. Her jaws being closely locked, it was with great difficulty administered. In a few minutes after swallowing the laudanum she sickened at the stomach, and vomited violently, complaining at the same time of great pain and distress at the pit of her stomach. The anodyne draught was entirely rejected; but, upon a moment's reflection, I did not regret this circumstance, as the disease assumed a very decided character, and I had made up my mind to rely upon the effects of wine alone, without the assistance of any other remedy; accordingly, about two o'clock, I directed a large wine glass full of *Madeira wine* (the glass containing about two ounces), to be given punctually every hour, and a cup of sago, or panado, with wine, to be given, from time to time, as her nourishment. At this time another physician, who had also been called upon at the time of the accident, arrived. I related to him what had been done, and the mode of treatment which I directed for the patient. This gentleman having had frequent opportunities of seeing this disease, and having frequently witnessed the failure of the ordinary mode of treatment, he at once, with great candour, acceded to the plan proposed; and, in addition to the use of wine, proposed the application of caustic to the part which had been wounded. Accordingly, the wound was freely pencilled with the lunar caustic, and afterwards covered with a poultice of bread and milk, with the view to obtain suppuration as soon as possible.

"The wine was administered with great fidelity by the mother of the patient, until about five o'clock the next morning. She had some slight convulsions in the course of the afternoon, but they were more of an hysterical sort, induced by her great anxiety of mind, than to be ascribed to the disease itself. Generally speaking, there had been a very manifest abatement in all her symptoms, and she had passed a more comfortable night than could have been expected. At five o'clock on Wednesday morning, her mistress, alarmed at the quantity of wine she had taken, desisted from its further use. From this time, appearances became more unfavourable, and at eight o'clock her jaws, which had been relaxed during the plentiful use of wine, again became stiff and closed. We saw her at nine, and immediately gave her about half a pint of wine, and ordered it to be administered as before. At one her symptoms were greatly changed; we found her sitting up in bed, eating small portions of roasted oysters, which she had called for. At this time her jaws were almost in their natural state. She had taken her wine punctually as directed, but experienced no inconvenience from it whatever, although in health she had not been accustomed to its use. Her pulses were still small and feeble, without any excitement from the use of wine. The heat of body remained at its natural standard, but not at all increased. The pain in her hand was abated,

but

but without any appearance of suppuration. Finding this mode of treatment to agree so well with her, we directed it to be continued. We saw her again in the evening: her symptoms still continued favourable, without the smallest febrile action from the use of wine. Having had no discharge from her bowels since her illness, an injection was administered; which remedy was afterwards employed from time to time in the course of her disease, whenever the state of her bowels required it. The wine was continued through the night: she slept, altogether, about three hours in the course of the night; and took freely of her panado.

"Thursday morning at nine o'clock, her complaints appeared to be, in a great measure, subdued; inasmuch that we did not think it necessary to visit her again until late in the evening, and directed the wine to be given at longer intervals, and the quantity to be lessened.

"She remained in a very comfortable condition until the afternoon—the *pain in her hand* returned with violence, extending to her arm and neck as before—her jaws were again closed—the rigidity of the muscles at the back of her neck returned—her mind became greatly agitated—she again complained of distress at the pit of her stomach—she fainted, and had several slight convulsions. Being called at that time, I gave her, with some difficulty, about half a pint of wine, and ordered a warm poultice to be immediately boiled. When prepared, I poured upon the surface of it, half an ounce of laudanum, and applied it to the wound. Her symptoms were in a short time allayed: I left her, directing the wine to be continued as before, a large wine-glass full every hour.

"We saw her again at nine in the evening. She remained tranquil—her jaws were less firmly closed, but the pain in her hand was not altogether removed. Although she had taken the wine punctually as directed, it had not produced the least apparent excitement. Having had no discharge from her bowels for the last twenty-four hours, an injection was administered. The anodyne poultice was renewed; and, in addition to this application, we directed her arm to be bathed with laudanum occasionally through the night.

"Friday morning we found she had passed a more comfortable night than the last; had taken her wine every hour; her jaws were perfectly relaxed; the pain in her hand had greatly abated, and she was enabled to extend her fingers at pleasure, which she could not do before. Her pulses and skin were natural; her appetite unimpaired; her mind composed, without any inconvenience from the wine. We directed her remedies to be all continued as before, fearing lest any alteration might subject her to a return of her complaints.

"In the evening we observed the wine had exhilarated her spirits; she became very talkative; her pulses became full, and free from all tension; her skin was somewhat heated, and all complaints removed except the wound at the wrist, which exhibited a healthy appearance, and was entirely free from pain, but without any sign of suppuration.



"We directed the wine to be administered through the night, but in smaller quantities and at longer intervals, unless her complaints should return and demand a continuance of it as before.

"Saturday morning we were informed she had slept the greater part of the night, and had taken but a small quantity of wine; her symptoms being, in all respects, favourable, the wine was discontinued, except a small quantity mixed with nourishment. A dressing, of simple ointment, was applied to the wound. From that time she remained free from any return of her complaints, and has since been in perfect health.

"Upon calculating the quantity of wine which she had taken, it amounted to three gallons."

[Dr. Noehden informs us, that Dr. Stütz, of Swabia, has succeeded in curing this dreadful disease, by the use of a hot bath, impregnated with kali and a few ounces of quick-lime; and giving internally ten grains of kali, and one of opium, every two hours. We merely mention this circumstance at present, as Dr. Stütz gives us hopes that he will treat this subject more explicitly in his *Miscellaneous Medical Observations*, which will soon be published.]

*Two Cases of the human Constitution being affected by the Contagion of Small Pox and Measles at the same Time; by P. TRACY, M. D.*

"In the spring of the year 1797, being then engaged in inoculating for the small-pox, two cases fell under my care, which exhibited unequivocal evidence of the possibility of two distinct diseases arising at the same period in the human frame, and each pursuing its ordinary course as when separately existing, attended with all their usual characteristic marks; and though I am sensible that the weight of medical opinion may militate against my experience on this question, still the conclusive evidence that the facts afford, has removed every doubt that previously existed in my mind on contemplating the subject, and leads me to cheerfully submit the cases to the candour of the faculty\*.

"Case 1. W. T. a young man, applied for admission into my hospital for inoculation, and mentioned, at the same time, his having been exposed, a day or two previously, to take the measles, which excited some anxiety in his mind, respecting the safety of receiving the small-pox, under the liability of being affected with the measles at the same period. Thinking this a good opportunity to determine, whether two specific contagions could operate at the same time on the human frame, and concluding no great danger would attend the experiment, I received him into the hospital, and inserted the variolous matter, from a well suppurated pustule, in the usual manner. The local inflammation, at the part inoculated, came forward at the common period, with as much activity as occurred on the other patients at the same time inoculated; which

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was followed by the precursory eruptive fever on the eighth day from inoculation. The symptoms were mild, and continued to the tenth day, at which period a number of distinct pustules were visible around the place inoculated, and many were discoverable on the face and neck, just emerging from the skin: the eruptive symptoms continued still in a moderate degree. The mild form which the variolous disease at this time assumed, greatly relieved my patient from his anxiety, arising from the fearful apprehension of being jointly attacked with two so formidable diseases as the small pox and measles, at the same period. I left him in this state of tranquillity; but in about four hours after I was called to visit him, and found him labouring under severe pain in the head and loins, attended with rigors, pyrexia, &c. As he had not exposed himself to take cold, or been guilty of any marked imprudence, I immediately suspected him affected with the premonitory symptoms of measles; and, in conformity with this belief, adopted phlebotomy, with the antiphlogistic method generally. On the next day, the measles efflorescence made its appearance on the surface, attended with cough, coryza, and all the other usual marks of this disease, which progressed in the common manner to a favourable issue. During this period, from the first accession of the measles symptoms, the local inflammation at the part inoculated continued bright, and the previous pustules not only remained visible, and progressing towards maturation, but a number of additional pustules actually appeared on the lower extremities, easily distinguishable by their hardness and prominency, and which matured in the usual manner as when separately existing, except that the suppuratory process seemed less rapid than in many other cases: thus, hand in hand, these two disorders proceeded to a favourable termination, which freed my patient from his great solicitude, and impressed me with the belief, that different principles of the animal frame may be morbidly excited, from different causes, at the same period, each equally productive of its peculiar form of disease.

“Case 2. J. S. after being exposed to the small-pox, in the natural way, was seized, at the usual period, with the symptoms of the disorder, which were followed by a pustular eruption on the surface; and, on the next day from their first appearance, was attacked with symptoms of a similar aspect to those which supervened in the former case, though in a more aggravated degree, which I treated as in the former instance, and which were followed by an universal measles eruption on the third day, with the usual concomitants. During this period, the previous pustular eruption, which was copious, remained bright and prominent, and new pustules continued to appear on the lower extremities, all of which proceeded to maturation in the usual manner; while the measles pursued their ordinary course, neither disease seeming to retard the other in its progress, but, like two friendly sojourners in separate apartments of one tenement, seemed mutually disposed to pursue their different careers, without officious interference or molestation to each other. This case, like the other, terminated happily. No room was left to



doubt the identity of the measles in either case, as neither of the subjects had previously been affected with that disorder: both had been exposed to take it: and a considerable number of my patients at the hospital, without having been sensibly exposed to the disease in any other way but from these patients, were affected at the usual time with this disorder.

“Feeling myself greatly incompetent to explain the variant sensitive principles in the human machine, which are subject to be conjunctly excited from different causes, each productive at the same time of the phenomena peculiarly marking distinct disorders, I shall avoid the attempt; but this belief is strongly impressed on my mind, that two or more specifically different disorders may arise at the same time in the human frame, and pursue their natural courses, notwithstanding the zeal with which the Brunonian advocates attempt to support the untenable theory of the unity and indivisibility of their principle of excitability pervading the system at large, and being susceptible of only an individual morbid excitement at a time.”

*Case of the delisterious Effects of Opium remedied by the Excitement of Pain.* By V. SEAMAN, M. D.

“Having so frequently observed the great quantity of opium that a person under acute pain will take, without having any soporific effects induced by it, I have long been of the mind, that pain might be usefully excited to remove the deadly influence of a large dose that may have been previously taken. This idea I intimated in my Inaugural Dissertation, published in 1792.

“Yesterday (July 2, 1799) I had an opportunity of putting my principles to the test of experiment, being called to see the wife of — Head, in Water-street, who had, about two hours before, taken an ounce of laudanum, and then lay in a deadly stupor, from which all the efforts of her friends were insufficient to awaken her. Attempts had been made to get some vinegar into her stomach, but, I believe, with little effect; nor did I succeed much better in endeavouring to give her a dose of white vitriol. I then procured a small switch, and applied it pretty freely to her arms and shoulders, which were defended only by a thin linen covering. I also applied some strokes to her legs. In the course of a very short time, indeed almost immediately upon the application of this remedy, she roused up, and begged me to desist. She continued for a time much confused, with involuntary fits of laughter. Two scruples of white vitriol were then administered, followed in about fifteen minutes by half a drachm of ipecacuanha; notwithstanding which, and also having her throat tickled with an oiled feather, it was near an hour before she could be made to puke; however, finally, she puked, and by the assistance of frequent draughts of warm water her stomach was pretty thoroughly evacuated.

“By the assistance of her friends she was kept awake, or, at least, slept but little at a time during the night, and this morning appears entirely recovered.”

## GERMANY.

*Dr. Lentin's Observations on the Dolor Faciei.* (Extracted from *Muse-land's Practical Journal*, Vol. IX. No. 1. p. 56.)

THE *Dolor Faciei*, or, as the French call it, the *Tic Douloureux*, is a disorder which has, in general, frustrated all attempts of the medical art; no medicine hardly has relieved the disease, and instances of a permanent cure have very rarely, if ever, occurred. This terrible complaint has a peculiarity whereby it materially differs from gout and rheumatism, viz. that the most vehement pain is brought on by touching, in the slightest way, the affected part at the period of its furious paroxysm. Some patients were obliged to subdue their appetite for a time, being fearful of indulging it by movement of the lips, by chewing, &c. Others, to procure relief, used to rub their cheeks, where it generally has its seat, in such a vehement manner, that they became quite callous. In one instance the disease ended in madness; in another, the patient got a little relief, after having suffered above eleven years; but great indurations of the glands of the intestines came on, of which he died; a third person, that was affected in this way, got a cancer in the mouth, and on the tongue. Dr. Lentin met, in the course of a twenty-seven years practice, with fourteen patients afflicted with this horrid malady; and he candidly confesses that he never could boast of having performed a permanent cure. The remedy he found particularly efficacious, was the *tinctura stramonii* (*Datura Stramonium* L.) *Rx.* *Semina stramonii* unc. ij., *vin. Hispanici* unc. viij., *spirit. vin.* unc. j.; *digere per aliquot dies et filtra*; *dosis* gutt. vj. Besides this, sulphureous baths, particularly that of Nen-dorf, in the dominions of the Landgrave of Hesse Cassel, proved very useful.

Dr. Lentin further observed some curious varieties of this evil; in one case the seat of it was in the foot, and a small piece of paper falling upon it, would excite the pain for several hours. Another remarkable variety, was observed by him in a lady, who otherwise enjoyed very good health: She felt a violent pain in the right side of her head, whenever she undertook any business which required some attention, or a rapid transition from one idea to another. She could not, for some time, hear well with the right ear, but this defect was remedied by the application of a strong magnet. She was much affected at the loss of her husband, whom she tenderly loved, and, as long as the violence of her grief remained, she was not at all troubled by the complaint; but her grief being diminished, the pain gradually became more vehement and lasting. When her attention was engaged by a lively conversation she found a short relief, but afterwards the evil returned with renewed force, and with a violence greater in proportion than the alleviation she had experienced. No symptoms of spasm could ever be traced, nor were antispasmodic remedies of any avail; even the *tinctura stramonii* was useless; and, in short, every possible remedy was given in vain. She seemed, however, to be in a blooming state of health.



health. In her youth she had had ulcerated glands on both sides of the neck, of which several scars were remaining along the jugular veins, and this might be considered as a sufficient cause, by obstructing the easy reflux of the blood from the head, if the pain had not commenced long after the cicatrization of the ulcers.—The disease is not likely to be of a cancerous nature, at least in its early periods, else the patients could not rub the parts immediately affected, so vehemently, without ill consequences. The patients are much influenced by dry and wet weather.

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*On the Use of the Oleum Hyoscyami in Hæmoptysis.* (Hufeland's Journal, Vol. IX. No. 2.)

Prof. Harles, of Erlangen, recommends the internal use of the oleum hyoscyami as one of the best, surest, and mildest remedies to stop an hæmoptysis. He distinguishes two principal species of that disease; the first originates in an excessive irritability, irritation, and more or less spasmodic action of the arteries of the lungs, which bring on an extravasation of blood into the air cells, and a rupture of the small blood vessels follows. The second consists in a diminished irritability and action of the vessels, from their debility and relaxation, by which a rupture of their membranes, and an effusion of blood, is occasioned. It is in the first the oil of hyoscyamus is indicated, as well as the extract of it, which has been much commended by other German physicians, though it has by no means so sure and quick an effect as the oil of the same plant. In most cases this has stopped hæmoptysis after a few doses have been taken; which either did not return at all, or was easily suppressed by the same remedy. Sometimes it has been necessary previously, to take a little blood from the patient. The mode of preparing the oil is to boil two ounces of fresh squeezed leaves of hyoscyamus niger, in six ounces of pure sweet oil for a little time.

One ounce of this to be mixed with two ounces of castor oil, or oil of sweet almonds, and four tea spoons full to be given as a dose four times a day.

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PHARMACOLOGY.

*Pharmacologiae Universae, pars I. quam in usum auditorum suorum concinnaverat F. T. VALTELEN, dum in vivis esset, M. D. Med. et Chimie in Academ. quæ Leidæ est, Professor ordinarius. Lugduni Batavorum apud Van Thoir, 1797-8. pp. 400.*

This work which made its appearance after the author's death, deserves, undoubtedly, to be ranked amongst the better productions of the kind, as it in general answers the requisites of a good practical Pharmacology. The whole of the work is divided into four heads. 1. *Indicationum Doctrina*; 2. *Universa Materia Medica, s. Pharmacologia*; 3. *Pharmacica Chemica*; 4. *Regulæ secundum quas formulæ medicamentorum consignari et ex arte præscribi debent.* The present volume contains only the first division and a part of the

the second. 1. *Indicationum doctrina*, from p. 15 to 84. Here the fundamental therapeutic principles are proposed, particularly with respect to the doctrine of indications; to which is added a division of the remedies into classes, according to their therapeutic effects, and the cases are exactly described and determined, which either require or reject the use of each class of remedies. It is not necessary to give a full account of the contents of this chapter, as it merely treats of therapeutic principles, which we must suppose to be sufficiently known to our readers; and we only wish the author had taken more notice here of the modern principles of medicine, the doctrine of the vis vitalis, &c. by which the medical art has of late undergone so many improvements. 2. *Pharmacologia Universa*. With this division begins Pharmacology, properly so called, wherein the simples and compounds are enumerated according to their qualities and uses, in a concise and easy style, and in the following order:

I. **VEGETABILIA**. 1. Farinosa, Mucilaginosa f. Gummosa; 2. Aquosa, Subdulcia; 3. Pinguia Oleosa Subdulcia; 4. Dulcia viscosa; 5. Acida et Acido dulcia; 6. Alcalina Vegetabilium salia; 7. Media Vegetabilium salia; 8. Austera, Adstringentia; 9. Amara et Amaricantia; 10. Fragrantia, Aromatica, Balsamica, Resinosa; 11. Acria, Caustica; 12. Acria et Amara, Emotica et Cathartica; 13. Acria virosa, Narcotica; 14. Vinum et Spiritus ardens.

II. **FOSSILIA**. 1. Terrae; 2. Salia Alcalina; 3. Salia Acida; 4. S. media; 5. S. terrestria; 6. Bitumina; 7. Metalla; 8. Semimetalla.

III. **ANIMALIA HORUMQUE PARTES**. 1. Terrestria et Terreogelatinosa; 2. Glutinosa, Pinguia, Oleosa; 3. Amara; 4. Acria Caustica; 5. Graveolentia Curationes per reliqua instrumenta.

IV. **AQUA**. 1. Aqua sincera fluida; 2. A. vaporosa; 3. Nix et Glacies; 4. Aqua medicata mineralis.

V. **AER**. 1. A. communis salutaris et noxius; 2. A. medicatus varius, a. Fumigatione, b. Odoribus; 3. Inflatio more Ægyptiorum; 4. Gas multiplex.

VI. **IGNES**. 1. Flamma; 2. Carbo; 3. Cauterium; 4. Electricitas.

VII. **MECHANICA REMEDIA**. 1. Venæsectio; 2. Scarificatio; 3. Cucurbitulae cruentae; 4. Hirudines; 5. Clyisma; 6. Setacea et Fonticuli; 7. Flagellatio et Urticatio; 8. Friccio; 9. Ligatura; 10. Motus; 11. Inoculatio; 12. Magnetismus. As the remedies contained in this first volume comprehend only the first eight classes of the vegetable kingdom, we have still to expect a considerable number of volumes.

Among the great number of books we possess on *Materia Medica*, the present certainly obtains a very honourable place. Though it affords nothing new, or represented in a new *view*, yet, the accurate determination of the cases in which the different remedies are to be given, the continual quotations of the most approved practitioners, render this book very commendable to the medical student. The only thing to which we have to object is, the order which has been followed by the author, as it is by no means calculated to give a survey of the different remedies according



cording to their essential properties and original virtues, though this should be particularly attended to. For, by dividing the remedies according to the *Regna naturae*, as has been adopted by the author, a separation of remedies, otherwise perfectly agreeing with each other, is unavoidable; and hence arises the disagreeable necessity to look for medicines, which are of the same kind, under different divisions, viz. vegetable and mineral, alkalies, vegetable and animal bitters, &c.; and further, no proper place can be given to remedies composed of substances belonging to different *regna naturae*. Besides this, it would not have been improper to prefix to each class of remedies, a general account of their effects and properties, as this certainly facilitates the attainment of the difficult study of Pharmacology to the beginner.

#### BOTANY.

*Lichenographiae Suecicae Prodomus.* Author ERICK ACHARIUS, M. D. Medicus Provincialis Ostro-Gothiae, &c. Lincopiae, 1798, pp. 264, 8vo. with two coloured plates, price 7s.

The number of Lichens found in Sweden has been considerably increased since the publication of Linnæus's *Flora Suecica*. Mr. Acharius made them, a long time since, a particular object of his botanical study, and his merits in this family of Cryptogamic plants are already sufficiently known by his former publications. The present work is a new pledge of his knowledge in the lichens, and certainly deserves the attention of every botanist. It contains more than one might expect from a *Prodomus*, and is full of interesting remarks, and far from being merely a dry catalogue. The distribution of the lichens he has followed here, is according to the Linnæan, and he divides them, therefore, into three families: 1. *Crustacei*; 2. *Foliacei*; 3. *Caulescentes*; each of them is again divided into several tribes, of which there are twenty-eight altogether, and a proper name is given to every tribe. The author has, besides, carefully attended to collect all synonymous terms, and every where referred to the best figures. Those lichens which are not met with in Sweden, he has enumerated at the end of each tribe. The whole work comprehends 529 species, 101 of which are new, and not yet described. The Swedish lichens amount to 345; the rest are not found in that country. A useful register concludes the work. We have purposely not given a more accurate account of this work, as we suppose it will come to the hands of every botanist who interests himself about the extensive and difficult class of lichens.

#### MEDICINE.

*Die Neuesten Entdeckungen, &c.* i. e. The latest Discoveries and Illustrations in Medicine, systematically arranged. By F. L. AUGUSTIN, M. D. Physician at Berlin, &c. vol. I. for 1798, 8vo. 564 pp. 1799. Berlin, Felsch.

The plan of the author is to collect yearly all discoveries and improvements in the medical art, and to represent them concisely and

and as faithfully as possible in a yearly publication. We must confess, that the author has shown a great deal of diligence and learning in the different branches of the medical art; and we are, moreover, convinced that this undertaking will prove very useful, particularly to those that neither have time nor opportunity to read and study all the publications in medicine, which appear from year to year.

The work is divided into two principal parts. The first treats of medicine in general; of the methodology of medicine, or medical theory, according to *Roesblaub*, &c. The second is divided again into two sections, of which the first contains, from p. 13 to 174, what belongs to the sound state of the body; the second, to the end of the volume, what has been stated of the diseased state of the body. At the end of this volume, all the writings are enumerated, of which the author availed himself in the composition of this book, and to which he has referred by numbers: they amount to 522, including the journals, single numbers of them, small pamphlets, and dissertations. The first section has three chapters: 1. *Of the doctrine of organisation*; 2. *Of the doctrine of vis vitalis, or physiology properly called*; and, 3. *Of dietetic*. The newest chemical and anatomical discoveries are mentioned here, relating to organization, *Roesblaub's*, *Reil's*, *Hufeland's*, &c. Ideas on vis vitalis and physiology are proposed, with a statement of the progress of galvanism and magnetism, according to *Stumboldt*, *Ritter*, &c. Of the discoveries in dietetic, he mentions *Mr. Flouquet's* water-bed, which consists of a frame of wood, across which are first nailed a number of straps, sufficient to support a kind of linen or flannel hammock, which is to be fastened above them; on that the person lies; the whole is hung on poles in a convenient part of a river. The proposals for the diet of different situations of life are likewise related; viz. the diet of soldiers, according to *Blair* and *Gilbert*; of seamen, according to *Stewart*, *Arthy*, and *Trotter*; of the miners, according to *Kortum*; of actors, according to *Stuppius*. The diet for women contains every thing belonging to the obstetric art. An Appendix is here added on *Brown's* diet, according to *Roesblaub*. The second section comprehends, under the title of *Nesodick*, 1. *Pathology*; definitions of disease, distributions of disorders, a critical review of the *Brunonian* principles, observations on organic diseases, &c. 2. *Therapeutic*, which is treated in three divisions, *Introduction*, *Materia Medica*, and *Special Therapeutic*. But we shall not go any further in relating the contents of this book; and only add the wish, that the author may find leisure to continue his plan.

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*Ed. Jenner Disquisitio de Causis et Effectibus Variolarum Vaccinarum ex Anglico sermone in Latinum conversa*, ab ALOYS CARNO, M. et Ph. D. 1799, Viennere; with four mezzotinto plates.

Dr. Jenner's first publication, "*Inquiry, &c.*" has already been translated into German, by Dr. Ballhorn, of Hanover; but the present



present Latin translation contains also his "*further observations*," and is faithfully done, though the Latin is not always the best. Dr. Odier's, of Geneve, experiments with the vaccine inoculation are added, and likewise some others, where the inoculation succeeded, and subsequent infections with small-pox matter did not take. The plates are well executed.

## PHARMACEUTICAL PROCESSES.

Citizen Fourcroy relates a new method of combining the oxygen with suet, to make the oxygenated pomatum. Take of purified lard as much as you like; let it melt by a gentle fire in an earthen vessel, add to it afterwards two thirds its weight of pure nitric acid 28—30 degrees strong, and stir the mixture with a wooden spoon, till it be cool; then put the whole into thirty times its weight of rain or river water, and let it boil for half an hour, and stir it continually, till it becomes cool. After having separated the fat from the water, melt it again, and preserve it in a glass or earthen vessel. Alyon's method is somewhat different from this; he takes sixteen parts of purified lard, and one part of nitric acid, 32 degrees strong. When the fat is melting, he adds the acid, and stirs it with a glass tube, by which means the azote is destroyed during the boiling, and the oxygen only remains combined with the suet, and he does not put it in water to purify. The fat imbibes in this manner more oxygen, and it is therefore a question which method is preferable. The lard treated after Fourcroy's prescription contains but one-third of its weight of oxygen, and Alyon's almost double the quantity. Fourcroy remarks, that if the oxygenated pomatum should not prove of any avail in medicine, it might be made use of to subdue quicksilver the sooner, and to prepare the ointment of it in a fifth of the time that is usually required. *Tromsdorf's Journal der Pharmacie, Vol. viii. No. i. p. 162.*

The same chemist lately discovered that the Kermes mineral and the sulphur auratum antimonii contained sulphurated hydrogen (gas hydrogène sulfuré) in their mixture. The difference between them consists in the former only containing sulphurated hydrogenous oxyd of antimony, and the latter also has sulphurated oxyd of antimony. The diaphoretic and sometimes vehement action of the Kermes mineral seems undoubtedly to depend upon the hydrogène sulphuré which is combined with it.

It would be worth while to examine, by an accurate analysis, the proportion of the hydrogen, sulphur, and oxyd of antimony in the Kermes, according to the different modes of preparing it, for the purpose of knowing whether it would not be better to prepare it by the simple combination of an oxyd of antimony, and of water saturated with gas hydrogené sulfuré. *Ibid.* p. 106.

To preserve extracts, particularly the bitter ones, which contain more gummy than resinous parts, from being spoiled when kept for some time, Citizen Demachy proposes to add the eighth part of alkohol when the extract begins to thicken, and to continue the evaporation afterwards. He is of opinion that the alkohol has that effect by being partly a mean of affinity between the gummi and refina, partly because it destroys the mucilaginous parts inherent to some resins, and produces thereby a more simple substance. *Ibid.* p. 181.

Citizen De Launay proposes an easier method of making mercurial ointments, viz. to rub the quicksilver with some old sweet oil, which has already become a little rancid; one drachm of this is sufficient to subdue a pound of mercury in a very short time: the lard is afterwards added by degrees. *Ibid.* No. ii. p. 27.

Mr. Juch proposes a new method of preparing the muriated barytes, or terra ponderosa salita, worthy the attention of apothecaries and druggists, which is as follows: Take one part of finely pulverized barytes or heavy spar; after having burned it, and quenched it in water, add two parts and a half of pot-ash. This mixture is melted, and kept on the fire for an hour and a half, in an earthen vessel, of which those fabricated in Hesse are particularly famous among the German chemists. When the whole mass is entirely fluid, pour it into a clean iron kettle, and boil it well with common water for the sake of clearing it from the sulphate of pot-ash or vitriolated tartar. The barytes obtained in this manner is still mixed with some undissolved spar. Saturate it now perfectly with muriatic acid, and let it evaporate. The remaining dry mass of salt is melted again in an earthen vessel; and being in a quiet state of fluidity, pour it upon a stone plate; and cover it with a vessel, to prevent any thing escaping, which sometimes happens in cooling. To give this mass a fine, regular crystallization, and to separate it from other heterogeneous matters, it must be dissolved in a sufficient quantity of distilled boiling water. It is not necessary to pulverize it before, because a greater part

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remains undissolved, when pulverized, than when the whole is put into the vessel. • In this solution, volatile liver of sulphur, dissolved in water, is dropped as long as any precipitation is visible; by which means it is cleared from any adherent metallic particles. The fluid is now filtered, and gently evaporated to the point of crystallization. *Tromsdorf's Journal der Pharmacie, Vol. vii. No. ii. p. 27.*

Mr. Eacard, of Bamberg, has found the following method of preparing a tinctura opii, much cheaper than laudanum liquidum, and which does not so easily precipitate as this, and wherein the quantity of opium is more accurately determined. R. opii optim. unc. ii. caryophyllorum dr. i. aqu. cinnamom. unc. viii. alcohol vini unc. iv. opii caryophyllis in pulverem tritis aqua cinnamomi cum alcohol permixta affunditur, vitrum bene clauditur. Digestione per vi dies in loco calido continuata, tinctura exprimitur clarificatur. — Ten grains of this tincture contain one grain of opium, if good opium has been employed. *Examination of the Brunonian System by Experiments, No. iii. p. 105.*

A new preparation of mercury has been invented at Petersburg, called the Mercurial Soap, which is said to be of very great avail in obstinate venereal complaints. A solution of quicksilver in diluted nitrous acid, or aqua fortis, is mixed with a solution of white Spanish soap; whereby an oily substance rises on the surface of it, which forms with caustic alkali a soap containing mercury. Two scruples of this remedy are dissolved in two ounces of distilled water, and it is given in drops. Hufeland gave it to eighty drops twice a day, with some success. *Hufeland's Journal, Vol. v. No. iii.*

Cit. Lartique proposes a method of preparing tartar emetic by combining the cream of tartar with the grey oxyd of antimony. The preparation thus obtained, has the preference of having a certain and more equal strength than tartar emetic obtained in the common way. *Journal des Pharmaciens, No. w. p. 122.*

Mr. Gräff, at Pareuth, made several experiments to obtain sugar from different vegetable substances. All species of graminaceous plants contain a considerable quantity of sugar when young. The Arundo Phragmitis Linn. gave in 16 lb. three ounces of sugar. Parsnips are also very productive of sugar. *Tromsdorf's Pharmaceutical Journal, 1800.*

*Discovery of a new Acid.*

The celebrated chemist, Mr. Klaproth, of Berlin, has enriched chemistry with the discovery of a new acid, which he obtained by the analysis of the honey-stone, or melilithus. It is not a simple mineral acid, but rather of the nature of a vegetable acid; and according to the properties it shows, it must be considered as a peculiar modification of those elements which constitute vegetable acids, and consequently as a specific vegetable acid, and an acid of its own. The properties it possesses are the following:

1. It crystallizes in small fibrous and glomerated masses, and sometimes in small and short columns. It does not appear to be able to crystallize at first, but gets the power of crystallizing by degrees, by imbibing more oxygen from the air.

2. Its taste is sweetish-sour at first, but becomes afterwards a little bitter.

3. Poured upon a heated potsherd it quickly evaporates, spreading a dark grey smoke, which, however, does but little affect the smell; a small quantity of yellowish light ashes is left, which, moistened with water, are quite tasteless, and cause no change at all in blue colours.

4. Neutralized with kali, it forms a crystalline mass of a fibrous, radiant texture.

5. Saturated with natron, or soda, it produces cubic crystallizations, partly diagonal single prisms, partly concrete in a stellated manner.

6. The neutral salt which it produces with ammonia, exhibits small hexagonal prisms, that lose their transparency when exposed to the air, and get a silver-white appearance.

7. Dissolved in water, and dropped into lime-water, into a solution of burned barytes in water, it causes a white precipitation, which disappears again by dropping to it some nitric acid.

8. A similar precipitation takes place when it is dropped into a solution of acetated barytes (acetate de baryte), that also dissolves again in nitric acid.

9. No precipitation followed with muriated barytes; but, soon after, some small needle-like crystals became visible in the mixture.

10. A solution of silver in nitric acid remained clear in mixing it with the acid of the honey-stone.

11. A solution of nitrate of mercury mixed with it, lets fall a frequent precipitation of a white colour, which was dissolved again by putting more nitric acid to the solution.



12. Iron dissolved in nitric acid, formed a yellow precipitation with it, and was made soluble by the addition of muriatic acid.

13. A solution of the acetate of lead is much precipitated by it, but clearly dissolved again by nitric acid.

14. With a solution of the acetate of copper, a verdigrease-precipitation followed.

15. A solution of nitrate of copper suffered no change by it.

These experiments show, that this acid enters into a combination with several metallic calces, and that its affinity to them is greater than that of the acetous acid, though inferior to mineral acids. Similar effects are produced by its neutral salts, and the precipitation caused by them is in a great degree soluble.

As this acid is constituted by the carbon, oxygen, and hydrogen, and easily destroyed by fire; and as, at the same time, it agrees with none of the known acids in its properties and relation, it deserves to be placed among the vegetable acids, as an acid of its own, to which the name of *Melilithic Acid* may be given.

The honey-stone, or Melilithus, from which it is obtained, is a fossil found in Saxony amongst the strata of bovey-coal (braunkohle), and was first described by Mr. Werner. It is of a honey-yellow colour, sometimes darker, sometimes lighter, and is always found in a crystallized octaëdrous form, but seldom in a perfect state. Its surface is generally smooth and shining, but sometimes rough and eaten. It rarely is quite clear, but generally half transparent only, and it is soft, brittle, and easily reduced to a yellow grey powder. Its specific weight is, according to Klaproth, 1,550. Mr. Klaproth was induced to subject this mineral to a new analysis, in consequence of the different opinions of chemists and mineralogists about its nature and constituent particles\*. Some of them took it for a kind of amber, as Mr. Born; others, for a sort of gypsum impregnated with petroleum. The chief particles are now, according

\* Prof. Lampadius, of Freyberg, in Saxony, found in 100 parts :

85½ carbon  
3½ petroleum  
2 siliceous earth  
5 water of crystallization

—  
96

Mr. Abick relates its constituent particles as follow :

40 carbonic acid  
28 water of crystallization  
16 carbonic aluminous earth  
5 benzoic aluminous earth  
5½ benzoic acid  
5 calx of iron  
2½ resin

—  
100

cording to Mr. Klaproth, a peculiar acid combined with aluminous earth; and the proportion in 100 parts of it is, 16 parts of aluminous earth and 46 of Acid, besides the water of crystallization. *Crell's Annals, Vol. I. 180.*

## MEDICAL and PHYSICAL INTELLIGENCE.

Prof. Hufeland distinguishes two species of vomition of the milk observed in infants. In the first, the milk is vomited up unaltered, a long time after it has been in the stomach; this is a symptom of weakness of the stomach, and want of digestion. The second species is very different from the former; the child throws up the milk in a more or less coagulated state, half an hour or a quarter of an hour after having taken it. This vomition is salutary, and gives proof of a strong and powerful gastric liquor; by means of it, the superabundant milk is brought up, and the rest better assimilated. Against the former complaint, as well as against some other common affections of that infantile age, Mr. Hufeland recommends the following powder. *R. Radic. valerian. dr. j., ieros florent. dr. jss., liquirit. dr. ij., semin. anis. dr. jss., croc. optimi gr. viijj., sal. amar. dr. j. m. f. pulvis*: two small tea spoons full to be taken three times a day. When the convulsions are stronger, an addition of flor. zinc. or musk, is useful; or some rhubarb, in case an evacuation should be thought necessary. In a feverish state, some tartarus vitriolatus, or nitre, may be added.—*Hufeland's Journal, Vol. ix. No. i. p. 179.*

Dr. Hargens, of Kiel, recommends in the Macula Corneæ, the external use of muriated barytes or terra ponderosa salita, dissolved in aqua laurocerasi, or distilled water of Prunus Laurocerasus L. The proportion is, terræ ponderos. salit. scrup. dimid. solve in aqua laurocerasi unc. iij. Some drops of this solution to be dropped into the eyes as often as possible; every hour, &c. The patient feels some pain after it, which ceases in a few minutes. The distilled water of Laurocerasus, by itself, is sometimes very useful in chronic ophthalmics with slight obscurations of the cornea. *Ibid.*

The same gentleman has found the external application of hydrargyrus acetatus, or mercury prepared with acetous acid or vinegar, very useful in chronic exanthemata, particularly in such as are of the flat, dry, herpetic, or serpiginous kind; but the general treatment must not be neglected. The shape in which he uses it, is an ointment of two scruples and a drachm of hydrargyrus acetatus, well mixed



with one ounce of fresh butter, or spermaceti, or sweet oil; or a solution of 10 to 12 grains of mercury in 5 ounces of rose-water with a little mucilage of quince-seed. Of this more or less to be several times a day applied on the eruption, till it dries away and disappears, and to continue it for some time after.

Two instances of Idiosyncrasy are mentioned by the same author: the one of a lady who was obliged to go to stool whenever she happened to sneeze repeatedly; a pinch of snuff had the same effect with her as a Cathartic. The second, a gentleman, who got always a diarrhoea at any great, unexpected, or sudden noise from a shot, drum, &c. As he was often subject to costiveness, such an accident became sometimes very desirable to him. *Ibid.*

*Salivation from opium.*—An old woman fell into a considerable salivation after every dose of opium she took, in whatever form it was given. She had medical assistance for a great many ulcerations which covered her body; and whenever occasion required opium, or even any other narcotic medicine to be given, that effect was always produced, though in a less degree by the other narcotics, extract. hydrarg. nux vomica, &c. It is probable, that, as she had used a great quantity of mercury before, from quacks, who supposed her to be venereal, a part of it might have remained latent in her body, which was freed by opium and other antispasmodic medicines, and then had its usual action. This is certainly very remarkable, as she had not taken mercury for twenty-two months before. An argument favourable to this conjecture is, that the salivation was stopped by liver of sulphur, the calx antimonis sulphurata, alkali, by which all mercury is decomposed. *I id.*

Dr. Knebel recommends the liver of sulphur as a very useful remedy in some cases of struma combined with spongia usta; besides, a combination of spongia usta with gunpowder in equal parts has had good effect. It is mixed with ten or twelve parts of dough and baked bread. Of this bread, three or four slices are given every morning and evening. *Materialien zur Arzneywissenschaft.*

Professor Reiche, at Erlangen, has discovered a new arcanum, which he maintains to be an infallible remedy for all sorts of fevers, when there is not a principal fault existing in the organization. It is founded, at the same time, upon a new theory of fever. He offered to the king of Prussia, to make this remedy known for a certain sum of money. As Mr. Reiche is known as a man of learning and respectability, the king has accepted his offer, and sent for him to Berlin, to make experiments with this new remedy, and to see whether it will prove so as professor Reiche asserts. A committee has been named, consisting of the most celebrated physicians at that place, viz. Dr. Selle, Dr. Friyte, Dr. Formey, and Richter, under whose inspection he is to try his practice. Of the patients who were trusted to him, several are said

said to have died, others recovered. But as no particular accounts have yet appeared of the transaction of this business authorized by those men, we think it proper to defer a relation to another time. Prof. Reiche is willing to communicate his arcanum to any physician for one guinea, for which he receives a paper consisting of half a sheet in quarto, printed in cyphers with a written key to it: but he desires every one to give him a bond, not to reveal the secret to any person.

Citizen Grandchamp relates two curious instances of preternatural ossification; the first was a bony substance as big as a fist, situated between the bladder and uterus, and inclosed in a proper sac, formed by the peritonaeum. The woman in whose body it was found, had during her life a habitual ischury, from which she only was relieved by a horizontal situation on the back. This complaint might have been easily mistaken for the stone. The second observation is an uncommon ossification of the gall bladder, found in the body of a woman of sixty-seven years of age. The place at the bladder was occupied by a hard mass as big as the head of a six or seven months foetus: the ductus cysticus was wanting, and the ductus hepaticus joined the liver immediately with the duodenum; the mass itself cohered to the liver by a small place of the size of a small coin. On opening it, a gluey substance was seen, softer in the middle, and harder the more it approached to the periphery, till it gradually became ossified. *Hufeland's Newest Annalen; i. e. Newest Annals of French Medicine and Surgery, Vol. i. No. i.*

Citizen Buniva made some experiments with injections into the blood-vessels of living and dead bodies. It is a known fact, that in some diseases, blood enters into vessels of the animal body, which do not receive it in a natural state. This phenomenon has been ascribed to a dissolution and putrefaction of the blood; an opinion considered to be erroneous by modern pathology. However, we still wanted experiments to prove its being so. The experiments instituted to that end, are the following: A mixture of calf's blood and water was injected into the vessel of a human and animal cadaver with some force; it penetrated into the smallest vessels which, during the life of the animal, contain no blood. The same injection was repeated in living animals, but it was impossible to effect the same phenomenon; the animal was killed at once, without the least loss of blood, by cutting through the spine; and the matter of injection immediately entered the small vessels. It is to be regretted, that these interesting experiments have not been more circumstantially described; many questions might be proposed, which now remain unsatisfied. *Recueil Periodique de la Société de Santé, à Paris, An. viii. Brum. p. 110.*

Citizen Vauquelin has found a new earth in the beryl from Siberia, whose properties are the following: 1. It produces with acids saccharine, gently astringent salts. 2. It is soluble in vitriolic acid, without



without forming alum. 3. It is soluble in ammonia, which separates it from the acids. 4. It has an equal affinity to magnesia as to aluminous earth. It has received the name of glucine, on account of its forming sweet salts with acids. *Journal de la Societ  de Pharmacie de Paris.*

We have received a NOTICE from the Cow-pock Institution, by which the Public are informed that genuine Cow-pock matter may always be had there, under the seal of the Institution.

Dr. BRADLEY will commence his Summer Course of Lectures on the Practice of Physic, at the Lecture Room, No. 102, Leadenhall-street, on Monday, June 2, at six o'clock in the afternoon.

Dr. BATTY will begin his Summer Course of Lectures on the Theory and Practice of Midwifery, and on the Diseases of Women and Children, on Monday, June 9, at his house, No. 6, Great Marlborough-street, at eleven o'clock in the morning. Practical Midwifery as usual. — N. B. This Course will be the only one given during the Summer.

#### NEW MEDICAL PUBLICATIONS IN GERMANY.

*Handbuch der Practischen Medicin*; i. e. Manual of Practical Medicine. By J. ARNEMAN, Prof. of Medicine at the University of G ttingen, 8vo. 296 pp. 1800. G ttingen, Rugsrecht.

*System der Practischen Heilkunde*; i. e. System of the Practice of Physic, &c. By Dr. HUFELAND, Prof. of Jena, 8vo. 1800. Jena, Fromman.

J. S. PALLAS *Species Astragalorum Descriptae et cum Iconibus Coloratis*; illustratae cum Appendice, T. I. et II. fol. 1800. Lips  Martini.

*Versuch einer Vollst ndigen Geschichte der Hernu. Nervenlehre*; i. e. Essay of a History of Neurology. By Prof. HARLES, of Erlangen, 8vo. 1800. Erlangen, Schubart.

#### TO CORRESPONDENTS.

The question proposed by J. W. cannot be discussed or answered in any periodical work; but we believe that any respectable physician will give him a satisfactory answer.

An anonymous correspondent thinks the case of mortification of the bladder, related in our last, was a retroversion of the uterus.

Communications are received from Messrs. Leeson, Hill, Kelson, Leese, Sebaro, Cusance, and Mitchell, which shall be noticed in due course.

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