strength, and the wound nearly filled up, still having a trifling cough, with some expectoration. On the first of August he was in a very bad temper, and crying violently; the edges of the wound again separated, but I was much pleased to find that no air passed through the wound, which soon after got into a healthy state, and is now quite cicatrized. The boy has a good appetite, and seems in every respect well.

Dartmouth, 13th August, 1821.

Observations on the preceding Case, by
HENRY EARLE, Esq.

In the course of last Autumn, I had an opportunity of seeing the subject of the preceding paper; and considering the case as one which deserved to be recorded, I requested the author to draw it up for the Society. It appeared to me to possess considerable interest in illustrating the different degrees of sensibility between the larynx and the trachea; and in explaining, in a satisfactory manner, the great urgency of the symptoms, and the imminent danger which attends cynanche laryngea. As a valuable additional fact in support of the practice, which was so ably pursued, I felt anxious that the case should not be consigned to oblivion; more particularly as I am

not aware of any analogous case published in this country.

In searching for information on this subject in foreign publications, I find many more instances of persons who were suffered to perish for want of timely assistance, either through the timidity and neglect of their medical advisers, or the ignorance and obstinacy of their friends and relatives, than of cases successfully treated. No less than seven fatal instances are recorded by M. Louis, in the excellent paper which he published on this subject in the memoirs of the French Academy, in which he so ably points out the propriety of performing the operation of tracheotomy, and shows with what facility and safety it may be performed. Other fatal instances are recorded in the same valuable collection of memoirs; and I have lately heard of three recent cases in this country, in which death was caused by the presence of foreign bodies in the trachea; in addition to the instance of the child who swallowed a portion of sealing-wax, an account of which was read to the Society at the close of the last session. In all these instances, sufficient time was allowed for the employment of the only rational and effectual means, but probangs, emetics and expectorants were resorted to, until a fatal termination was put to the sufferings of the individuals.

On the other hand, M. Pelletan, in his Clinique
VOL. XII. D

Chirurgicale, has related some successful and encouraging cases, in which he removed the foreign bodies, and rescued his patients from impending death. Rau, Heister, Verduc, and Engel mention similar cases.

From the narratives of cases in which the operation was not performed, it would appear, in many instances, that the medical men and the friends of the patients have been deceived by the state of calm which so often succeeds, after a foreign body has passed the rima glottidis; which has induced them to draw very erroneous conclusions, and to doubt the presence of any thing in the trachea. This comparative tranquillity is, however, most deceptive, and is certain, sooner or later, to be succeeded by serious and most distressing symptoms, which terminate fatally. Instances are on record, in which patients have survived months, and even years, with foreign bodies in the windpipe, which caused constant distressing cough, and purulent expectoration. In some of these cases, after great efforts, and a threatening of suffocation, the patients have succeeded in getting rid of the foreign bodies, but the diseased action which they produced has continued, and the patients have died with every symptom of pulmonary consumption. Interesting records of such cases will be found in Bartholin *, Tulpius †, Hechsteterus ‡, and Schurigius §.

* Histor. Anatom. cent. ii. Hist. xxvii. and cent. vi. Hist. xv.

† Lib. ii. Obs. vii.

‡ Obs. Decad. vi. cap. x.

§ Chylologia Histor. Medic. cap. v. p. 85.

That the operation of tracheotomy is the only effectual and rational mode of relieving persons with foreign substances in the windpipe, is a truth which cannot be too often inculcated ; and it is not less true and important that the operation should be performed as promptly as possible, before symptoms of irritation and inflammation have established themselves, which it may not be in our power to arrest, even by the removal of the exciting cause. If any additional arguments were required in support of the immediate adoption of the operation, as soon as it has been ascertained that any foreign body has passed into the windpipe, I would urge the consideration, that the patient's life is in the most imminent and constant danger, from the possibility of the substance being again forced, by any violent effort of coughing, into the rima glottidis, where it may cause almost instant death before any assistance can be afforded ; of which occurrence numerous instances are recorded, and many more have no doubt taken place.

Apprehensions still exist, in the minds of some medical men, of the probable difficulty of cutting on the exact spot where the foreign substance may be. This opinion was advanced by Haller, and I have reason to believe that it is still entertained. With a view to dispel these doubts, it will perhaps be admissible to state briefly the experiments of M. Favier, related in the 14th volume of the memoirs of the French Academy, page 445. *et seq.*

M. F. introduced irregularly shaped bodies through the rima glottidis into the trachea of a dog, and afterwards divided several rings of the trachea, when the foreign bodies were forcibly propelled by a strong expiration. These experiments were several times repeated, with the animal in different positions, and always with the same results ; from which, the author draws the following conclusion : that the fear of not being able to meet with the foreign bodies, ought not, on any occasion, to deter practitioners from operating, as they will in all cases be propelled through the wound in expiration.

These experiments are certainly very satisfactory ; and no doubt, in the majority of cases, foreign bodies would be thus expelled, if the opening were made sufficiently large. The result of these trials likewise tends to diminish the apprehensions, which would naturally arise, from the introduction of any blood during an operation. Still, however, cases will occur in practice, in which this spontaneous expulsion cannot be depended upon. Pelletan relates two instances, in one of which, from the form of the body (the jaw bone of a mackrel), and in the other, from its situation (in the left ventricle of the larynx), the substances required to be extracted ; which he performed, in both cases, with perfect success.