SUCCESSFUL TREATMENT
OF A
CASE
OF
CYNANCHE LARYNGEA.

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COMMUNICATED BY

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ABOUT three o'clock in the morning of the 19th July, 1794, I was called, by his particular desire, to attend Dr. J. M. H. a physician of considerable experience, 46 years of age. I found him in bed, surrounded by the physicians and apothecaries of the army commanded by the Earl of Moira, then encamped near Southampton. His face appeared very much swollen, and redder than usual. His eyes were protruding and bloodshot: there was a fulness about the neck, the muscles feeling very turgid, and the breast was suffused with a purplish

colour, such as I have frequently seen in the earlier stage of the Yellow Fever, in plethoric habits. There was no increased erubescence in the fauces, nor any enlargement of the tonsils; and no great difficulty in deglutition. When questioned with regard to the seat of his complaint, he pointed to the pomum Adami, and cried, "There." The skin was very dry, and its heat was considerably above the natural standard. The pulse was 112 in the minute, remarkably full, strong, and laborious; and the carotid arteries pulsated very forcibly and visibly. His voice was hoarse, as from a common catarrh, but he had no cough; the dyspnœa was not constant, nor was there any symptom present which indicated inflammation of the lungs. He had great somnolency; so that he would attempt to sleep (which he never could do for above a minute at a time), even while the by-standers were interrogating him concerning his disorder. As soon as he had closed his eyes, he began to snore; when his face was instantly covered with a crimson suffusion; and he awoke seemingly in a fright, gasping for breath, and casting both arms out of bed, with the palms extended towards us, looking most anxiously for assistance, being unable to utter a word.

In this most painful struggle, which threatened immediate extinction of life by suffocation, one of the physicians had very happily devised the administration of oxygen gas, the inhalation of which

instantaneously gave relief, and respiration was restored.

These paroxysms recurred as often as the patient fell asleep, the disposition to which was so invincible, that this distressing scene was repeated every ten minutes, and had been so for several hours, in spite of every endeavour to prevent it.

Upon inquiry, I found that the patient had passed the 16th with a convivial party in camp, where he had drunk rather freely. He was called up in the night, to visit a general officer, and remained some time at a window conversing with the messenger, with a strong breeze blowing upon him, while undressed, and in a profuse perspiration. The ensuing day he felt a sense of fulness in his throat, with headache and other symptoms of fever. He took a purge, but had a restless night, and the following day kept his bed. The principal medical staff officers visited him in the afternoon, when the disease, as described above, had completely established itself. There was a suspicion of this being a gouty affection; but knowing the patient's mode of living and very full habit of body, and that he was not subject to atonic gout, but had regular fits of that disease in the extremities, I had no hesitation about his complaint being an inflammation of the larynx and superior part of the trachea.

Some difference of opinion regarding the nature and treatment of the disease here occurred, the

other physicians being averse to bleeding, considering the case more as spasmodic than inflammatory. Their objections were overruled, and it was immediately decided to take sixteen ounces of blood from his arm. By this he expressed himself to be considerably relieved. It was remarkable that while the blood was flowing from the vein, by a large orifice, the spasmodic affection of the throat did not recur : nevertheless, although the patient derived much benefit from the bleeding, this terrific symptom still continued to assail him upon his dozing ; but with abated violence. Six ounces of infusion of senna, with some Glauber's salts, were ordered to be taken in the course of the morning. I left him at six o'clock, and at eleven A. M. met again the attending physicians. We found the advantage gained by the bleeding, according to appearances, only temporary: the pulse was full, hard and strong, and the sense of suffocation, if not quite so frequent, was as formidable as ever. A still larger quantity of blood than in the previous bleeding, was drawn from the arm with manifest advantage ; for he could now sleep for a few minutes together without the dreadful sense of suffocation supervening, and the horrible appearance of strangulation. A very large blister was now applied to the breast.

When I called in the evening (the other physicians having taken their leave) I found a most pleasing change ; the sense of suffocation was by no means so frequent in its occurrence, or so urgent as in the

forenoon ; the frequency, fulness, and strength of the pulse were lessened ; and the skin was much cooler. The cathartic had operated freely, and the blister had risen in every part. But the most flattering circumstance was, that the patient had enjoyed some refreshing and undisturbed sleep. Draughts with aq. ammon. acet. and tartarized antimony were ordered for the night. The next morning (the 20th) I found he had passed a very bad night, with frequent attacks of the sense of strangulation. He complained of headache, and was feverish, the pulse being fuller and more frequent than at the preceding visit. The blood taken the day before was covered with buff, and much cupped ; and the urine was very high-coloured. Under these circumstances, I did not hesitate again to have recourse to the use of the lancet, which now proved truly efficacious. From this period his safety seemed to be ensured, as he could shortly after lie upon either side, and sleep undisturbed for an hour together, without being seized with the spasmodic affection of the throat, where he merely felt a dull pain and uneasy turgescence, which gradually subsided under the use of purgatives and the antiphlogistic regimen. Previously to his obtaining manifest relief, he lay constantly upon his back, with his head a little elevated, in order to give as much capacity as possible to the thorax. For some time after his recovery, he continued to be hoarse, and to complain of a huskiness in the throat, which he endeavoured to remove by hawking and trying to expectorate.

Thus was this formidable disease extinguished at its commencement. Had it been treated in a less decided way, there is every reason to suppose from subsequent experience, that it would have proved irremediable.

To the above account I shall only add, that the patient who was the subject of the complaint was destroyed fourteen years afterwards, by another attack of this most painful and formidable disease, as is stated at large in the Third Vol. of "Transactions of a Society for the Improvement of Medical and Chirurgical Knowledge"*. My inducement for entering into this detail, is to compare the two attacks of the same disease in the same person, after the lapse of many years; and to add somewhat to the information which has lately been obtained concerning the nature of a malady hitherto scarcely noticed, and known chiefly by its fatal termination.

* Sec 2d Case of 22d article.