BRITISH MEDICAL JOURNAL:

BEING THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION.

EDITED BY ANDREW WYNTER, M.D.

No. XLIX.]

LONDON: SATURDAY, DECEMBER 5, 1857.

[NEW SERIES.]

Illustrations OF HOSPITAL PRACTICE: METROPOLITAN AND PROVINCIAL.

KING'S COLLEGE HOSPITAL.

I. FEVER AND PNEUMONIA TREATED BY BRANDY.

Under the care of R. B. TODD, M.D., F.R.S.

[From Notes by Dr. WOODFORD, House-Physician.]

FREDERICK S., aged 14, a pale and rather weakly looking boy, was admitted under Dr. Todd's care on November 6th, suffering the ordinary symptoms of the prevailing epidemic—typhoid fever. After working at his master's (a law stationer) all day, he was, on the evening of November 5th, seized with shivering, followed by heat of skin, thirst, and headache. On November 6th, his bowels were relaxed, and the abdomen tympanitic and tender on pressure. No spots, however, were noticed. The pulse was 128; respiration 28. There was no cough or dyspnoea. He was ordered chloric ether with ammonia every four hours, turpentine stupes to the chest, and two teaspoonfuls of brandy every two hours.

November 8th. There were still great pain over the abdomen, purging, and tympanitis. Pulse 128; respiration 28. He was ordered an enema of gruel, and then one composed of starch and opium. The latter succeeded in checking the alvine discharges.

November 9th. His breathing had become very quick, 50 in a minute, with short hacking cough. The pulse remained at 128. He spat a little viscid rusty coloured mucus, for the first time; and, on examination of the chest, there was found considerable dullness on percussion at the base of the right lung posteriorly, with fine crepitation and bronchial breathing. The purging had ceased, and the tympanitis was gone. He was ordered two drachms of brandy every hour, and turpentine stupes to the chest.

November 10th (fifth day of the fever and second of the pneumonia). The pulse was 104, the respiration 48. Bronchophony, bronchial breathing, and in parts some crepitus, could be detected over the whole lower lobe of the left lung. The cough was very troublesome. He was ordered to continue the brandy every hour.

November 11th (third day of the pneumonia). The pulse was 100, much increased in strength and tone. There was still slight crepitation at the base of the left lung; and more crepitus over the right lung, with less bronchial breathing. The voice was ægophonic at the base of the lung behind. He was coughing a great deal. The brandy and stupes were continued.

November 12th (fourth day of the pneumonia). The cough was greatly diminished. The pulse was 82; respiration 31. The crepitation had disappeared from the base of the left lung, and there was nothing but healthy breathing to be heard over the whole of that side. Some coarse crepitus still existed over the right lung, and some bronchial breathing at the lower angle of the scapula.

November 13th (fifth day of the pneumonia). The pulse was 76, the respiration 30. He coughed very little, and spat much less mucus—viscid, but not rusty.

November 14th. The pulse was 68, the respiration 32. The respiration at the base on both sides was vesicular. There was still bronchial breathing at the lower angle of the scapula, where a blister, the size of half-a-crown, was applied. The stimulant was still persisted in.

November 16th (eighth day of the pneumonia). The cough

and spitting were quite gone. The breathing was vesicular over nearly the whole of both lungs. The pulse was 64, of excellent quality; the respiration 24. He felt strong and hearty, and was pronounced convalescent.

REMARKS. The above is a striking instance of the adynamic type of fever at present prevailing in the metropolis, of which we hope shortly to give other examples, and of how even severe visceral inflammation, complicating such fevers, may be successfully treated on the indications given by the principal disease. It will be observed that, as the stimulant was steadily persevered in, the pulse gradually diminished in frequency, though increasing in power; and the evidence of effusion within the chest, and in the parenchyma of the lung, diminished; and as the treatment was so very simple, and the inflammation so evidently increasing at its commencement, there could be no doubt of its being a real instance of cure, and not merely recovery. The same practice would doubtless be reprehensible in country districts, and among a less debilitated class of patients; but in London, as far as our experience goes, the opportunities for applying the old "antiphlogistic regimen" are becoming more and more limited, and the stimulant system universally gaining ground.

II. PLASTIC OPERATION FOR CICATRIX IN THE NECK.

Under the care of W. FERGUSON, Esq., F.R.S.

[Reported by P. W. SWAIN, Esq., House-Surgeon.]

Hannah P., aged 20, was admitted on September 20th, under the care of Mr. Ferguson, on account of the contraction of a cicatrix in the front of the neck, from a burn which had occurred thirteen years before. The cicatrix extended from the lower border of the lower jaw to the root of the neck, pulling the lower lip down to within a very short distance of the sternum, and keeping the mouth permanently open, thus giving the patient a very hideous appearance, and preventing her from retaining her saliva.

On October 10th, Mr. Ferguson divided the cicatrix transversely. This immediately enabled the patient to shut her mouth and retain the saliva.

The wound continued for some days to display rather a languid appearance; healthy suppuration then came on. An instrument was made for the patient by Mr. Matthews, consisting of a sort of crutch to support the head, bearing upon a girdle passing round the patient's waist, and keeping the chin at the proper distance from the sternum. The wound, at the last note (October 30th), was healing rapidly, and the patient was freed from the inconvenience of the sialorrhoea, and the deformity of her permanently open mouth.

REMARKS. The improvement in this case, after division of the cicatrix and extension, was very marked, and was well shown by two photographs, executed by Mr. Swain, of the patient in her original state, and with the instrument applied. We have before observed on the importance, in plastic surgery, of illustrating the progress of the operation by photography, and are glad to see that this invention is coming into more frequent use in our hospitals.

ST. MARY'S HOSPITAL.

I. RUPTURED PERINEUM OF THIRTY YEARS DURATION : OPERATION : CURE.

By I. B. BROWN, Esq., Surgeon-Accoucheur to the Hospital.

THE following case was kindly sent me by my friend Mr. Hugh Rump, of Wells, in Norfolk. He could not tell me the name of the accoucheur or midwife who attended her. The case appearing to me to offer some striking practical points, I have extracted the notes of our clinical clerk from the hospital case-book.

A. V., aged 55, married, the mother of three children, was admitted into Boynton Ward, in St. Mary's Hospital, under my care, on October 14th, 1857. When in labour of her first

child, thirty years ago, at the time when the head was passing, she felt something give way. The labour was tedious and difficult. She soon perceived that she had lost all control over her motions; and though her general health soon became good, yet she remained a prisoner in her own room, and a source of misery both to herself and her friends, as, no matter whether relaxed or costive, her fæces passed away involuntarily.

On examination, the perinæum was found torn; the rent extended through the sphincter. There was, of course, a good deal of bearing down pain, and the os uteri was ulcerated.

October 21st. I performed my usual operation of denuding the parts, bringing them together with deep and superficial sutures, dividing the sphincter ani, and then keeping her under the influence of opium, with generous diet and wine.

October 22nd. She was ordered to have daily four ounces of port wine, two ounces of brandy, a pint of beef-tea, and two eggs.

October 24th. The deep sutures were removed. The parts were healing. She was ordered to have eight ounces of port wine, a pint of porter, mutton chops, and the following mixture:—

℞ Decocti cinchonæ ℥vi; acidi nitrici diluti ℥i; tincturæ opii ℥i. M. Fiat mistura cujus sumatur ℥i ter die.

October 30th. The interrupted sutures were removed. The parts were healed, and looked very healthy.

November 1st. A dose of castor oil and a simple enema caused the bowels to act for the first time for thirty years, with the motions perfectly under her own control.

November 5th. The parts were quite healed.

November 20th. She left the Hospital with the perinæum perfectly sound, firm, and thick. She has perfect control over her motions, and is more comfortable both in mind and body than she has been for thirty years.

REMARKS. I would observe, that no case could more fully illustrate the benefits of an operation such as I have so long practised and advocated. Here was a woman who for half of her life had been in so miserable a plight that death was preferable to existence—debarred from all comfort or pleasure—a burden to herself and all about her—in three weeks perfectly restored to peace of mind and body. I pared the mucous membrane rather deeper than usual, because, from the long continuance of the irritation, the parts had become very thickened and hardened. I also inserted the deep sutures well, to increase the depth of the new perinæum. I look upon opium, wine, and generous diet, as perfect sheet-anchors, as, without their very free exhibition, the most perfectly performed operation of this character will not succeed.

II. TABLE OF CASES OF ACUTE RHEUMATISM TREATED BY LARGE DOSES OF OPIUM.

Under the care of F. SIBSON, M.D., F.R.S.

No.	Sex and Age.	Prominent Symptom on Admission, and Duration of Attack.	Heart Affection, when noticed.	Progress of the Case, and complications (exclusive of Cardiac Affection).	Quantity and Method of Administration of Opium.	Other Remedies.	Duration and Result.
1	M. 20	Pain and swelling in all the joints. Sour sweat. Oppressed breathing. Fever. 14 days.	Bruit, 4 days after admission.	Great pain came on at the same time as the murmur. This was relieved after six days of the opium treatment. He could leave his bed about a month after admission. The bruit continued nearly till his discharge.	Fourth day, opium gr. $\frac{1}{2}$ every 3 hours; and gr. i at night, to which, in four days, gr. $\frac{1}{2}$ of acetous extract of colchicum was added; and it was continued every four hours. Opium seems to have been discontinued after fourteen days.	At first (before the commencement of the opium) only purgatives. With the opium, a little calomel and colchicum at night. After the opium, at first, digitalis and steel; then, a week afterwards, steel and quinine.	Cured. 6 weeks from admission.
2	F. 17	Swelling and great pain of knee and wrist, preventing sleep. Much fever. 1 week.	Bruit, the day after admission.	The pain seemed to diminish rapidly after the commencement of the opium, and ceased seven days after admission, recurring occasionally. The bruit continued up to the time of her discharge.	Opium gr. $\frac{1}{2}$ every three hours on the day of admission. Increased to gr. i two days afterwards; but this was given up that evening, and only gr. i given every night. Then four days after admission, gr. i twice or thrice a day. Diminished again, eight days after this, to gr. i every night. Omitted (as it seems) on the seventeenth day.	Lemon juice at commencement of attack (time not specified). Then, as she improved, tonics, bark, quinine, etc.	Cured. 26 days.
3	F. 23	Pain in back, ankles, and right side. 3 days.	No heart affection.	The pain in the joints increased for a few days, and extended to others which were not affected at first, then rapidly subsided. Copious deposit of lithates. Great perspiration.	Day of admission, opium gr. $\frac{1}{2}$ every four hours, and gr. i at bed-time. Next day, gr. i every four hours. Diminished again to gr. $\frac{1}{2}$ every four hours on the third day, on account of dry brown tongue and constipation; and on the following day to gr. ij every night.	Lemon juice at first. Occasional purgatives. Tonics on subsidence of pain.	Convalescent (able to leave her bed, free from pain and swelling). 10 days. (No further notes).
4	M. 10 Epileptic.	Pain in head, left side of body and legs. Swelling and redness of ankles. 3 days.	No heart affection.	The pain yielded rapidly; considerable deposit being noticed in the urine about the same time.	On day of admission, opium gr. $\frac{1}{2}$ every three hours till third day, when two doses were omitted, as he was slightly affected. Then gr. i every night, and gr. $\frac{1}{2}$ every six hours. Omitted 7 days after admission.	Lemon juice first two days. Ammonia and bark when the opium was omitted.	Cured. 24 days.

No.	Sex and Age.	Prominent Symptom on Admission, and Duration of Attack.	Heart Affection, when noticed.	Progress of the Case, and Complications (exclusive of Cardiac Affection).	Quantity and Method of Administration of Opium.	Other Remedies.	Duration and Result.
5	M. 19	Great pain and swelling of most of the joints. Shortness of breath. 6 days. Had been, apparently, taking mercury.	Bruit observed 2nd day after admission.	The pain and swelling in joints subsided greatly on the day after commencement of treatment, succeeded by symptoms of cardiac affection. Then the pain recurred, with constipation, brown tongue, acid sweats, and deposits in the urine. The pain subsided in about sixteen days. The bruit persisted till his discharge.	On day of admission, opium gr. i every three hours. Diminished next day to every six hours. On the third day ordered opium gr. i, with comp. coloc. pill gr. iv every four hours, with two pills at bed-time; and so occasionally varying from four to six hours, till they were finally omitted, except at bed-time, seventeen days after admission.	Lemon juice at first. Occasional purgatives. Leeches to the præcordia on occurrence of the bruit.	Cured. 8 weeks.
6	M. 38	Pains and swelling in the loins, knees, and shoulders. 2 weeks.	No heart affection.	The pain soon yielded, and the swelling rapidly subsided. The urine showed a trace of albumen till two days before discharge. He had at that time no pain or swelling.	Day of admission, opium gr. i every four hours gr. ij with comp. coloc. pill gr. viij at bed-time. Diminished to gr. i every six hours (with the same pill at bed-time) on the sixth day.	Lemon juice at first. Occasional purgatives.	Cured. 9 days.
7	M. 42	Swelling, redness, and pain of wrists and ankles. Some fever. 5 days. Had recently had another attack.	Bruit observed on second day after admission, perhaps from remains of previous attack.	The pain soon yielded. On the second day the signs of bronchitis were observed. This having subsided under the use of antimony, he did well.	On admission, opium gr. i every four hours. Third day, changed to opium gr. ij, and pilul. hydrargyri gr. iij, at bed-time; and so continued till his discharge.	Lemon juice at first. Saline mixture, with antimony, on occurrence of bronchitis.	Cured. 2 weeks.
8	M. 14	Pain in knees and ankles. 3 days. Rheumatism from the previous year.	Bruit heard a week after admission.	The pain seemed to yield on the dose of opium being increased; but the bruit continued up to the last note. He was able to leave his bed in about six weeks. Diarrhoea came on while he was taking the opium.	Day of admission, opium gr. $\frac{3}{4}$, comp. coloc. pill gr. $\frac{1}{2}$ every four hours. Increased on fourth day to gr. i every four hours, with camphor gr. $\frac{1}{4}$. On twelfth day the quantity of opium doubled at bed-time. Omitted four weeks after admission.	Lemon juice at first. Leeches to præcordia. Chalk and opium powder for the diarrhoea. On cessation of the large dose of opium, iodide of potassium, with grey powder and Dover's powder at night.	Convalescent. 7 weeks. Notes deficient.
9	F. 19	Pain and swelling in ankles and legs. No previous attack. Affection of the heart.	Bruit heard on admission.	During the time for which notes were taken (seventeen days) the pain seems to have soon subsided, but the cardiac bruit persisted.	On day of admission, opium gr. i every three hours.	Lemon juice at first, and leeches to the præcordia. Bark and ammonia.	Notes imperfect. 17 days.
10	F. 15	Swelling and redness of feet, ankles, and hands. 9 days. An attack seven years ago.	Bruit observed 4th day.	The pain yielded in three days to the opium, but the bruit persisted till the time of her discharge.	On day of admission, opium gr. $\frac{3}{4}$ every three hours; gr. ij at bed-time. This seems to have been omitted after three days on account of agitation of the nervous system, quick pulse, etc.	Lemon juice at first, with poppy fomentation to the affected parts. Leeches to the præcordia on occurrence of bruit.	Cured. 28 days.
11	M. 18	Pain and swelling of ankles, elbows, wrists, and knees; with pain in the præcordial region. Much fever. Less than a week. Two previous attacks.	Bruit observed next day.	The pain yielded very gradually. The bruit disappeared a few days before his discharge.	On admission, opium gr. i every four hours. The length of administration is not noted.	Lemon juice. Purgatives frequently requisite. Blisters to chest.	Out-patient. 4 weeks 5 days.
12	F. 18	Swelling and great tenderness of knees and ankles. A few days.	Bruit perceived the day after admission.	The pain continued long the prominent symptom; not much inflammation of the joints. The bruit persisted, but very faint, up to the time of her discharge.	On admission, opium gr. i every three hours, continued for three days. Then omitted on account of drowsiness. Resumed two days afterwards, and continued every three hours for five days. Then comp. soap pill gr. i every four hours, gradually diminished to every night, and then omitted forty days after admission.	Lemon juice, six ounces a-day for a few days: no effect. Leeches to præcordia. Colchicum and alkalies; occasional purgatives, then tonics.	Cured. 7 weeks.

No.	Sex and Age.	Prominent Symptom on Admission, and Duration of Attack.	Heart Affection, when noticed.	Progress of the Case, and Complications (exclusive of Cardiac Affection).	Quantity and Method of Administration of Opium.	Other Remedies.	Duration and Result.
13	F. 16	Swelling and pain of hands, wrists, and legs. 3 weeks.	Bruit perceived the day after admission.	The pain was severe for some time. She had some alarming fits of syncope. The bruit remained till her discharge.	Opium gr. i (with a small quantity of colocyth) every three hours for twelve days, except two, when it was taken every four hours, and for two days, every six hours. On the twelfth day, comp. soap pill gr. vj every six hours, gradually diminished.	Lemon juice for a few days: it appeared to produce no benefit and was omitted. Leeches; mustard poultices; and soothing liniment.	Cured. 7 weeks 2 days.
14	F. 19	Pain and swelling in right hip and foot, also in hands and wrists. Cardiac affection. 1 week.	Bruit on admission.	The pain was quickly relieved at first. Bruit disappeared on tenth day.	On admission, opium gr. i, comp. coloc. pill gr. iss. every four hours for four days; then every six hours for ten days more; then every night.	Alkalies (bicarb. of potass in barley water) at first. As the pain and inflammation subsided, tonics were ordered.	Cured. 6 weeks.
15	M. 25	Great pain in joints of the lower extremities. Fever. Cardiac affection. Less than a week.	Bruit heard next day (probably existed on admission.)	Pain relieved greatly after five days opium treatment; but continued in a modified form, with a relapse occasionally for three weeks. He is reported free from pain on twenty-second day. The bruit continued rather longer.	On admission, opium gr. i, acet. extr. of colch. gr. iss every three hours for three days; then every five hours, with pill containing gr. iss of opium at night. Omitted temporarily next day on account of drowsiness. Continued six hours, after temporary cessation, till eighteenth day (with pill at night). Then comp. soap pill, and comp. coloc. pill, aa gr. v, three times a day. Reduced to twice a day on twentieth day, and omitted on thirtieth.	Alkalies at first. Leeches to the præcordia; occasional purgatives; lemon juice; then tonics.	Cured. 7 weeks.
16	M. 36	Pain and swelling in knees, hands, and wrists.	No cardiac affection.	Pain soon relieved; then inflammation (bronchial) of lungs came on.	On admission, opium gr. i, comp. coloc. pill gr. iiss every three hours. Next day every six hours; next day twice daily; and soon afterwards omitted.	Alkalies and purgatives at first. Lemon juice for a short time. Then antimony, etc., for bronchitis.	Cured. 3 weeks 5 days.
17	M. 9	Pain and swelling of hands, ankles, and knees, with headache and cardiac affection. 11 days.	Bruit on admission.	The pain and swelling soon yielded. The bruit disappeared a few days before his discharge.	On admission, opium gr. ss, comp. coloc. pill gr. i, every three hours. Omitted next day on account of drowsiness. Resumed on the following day, and again omitted for the same reason. Then about three pills a-day, as he was too sleepy to take more. Omitted finally on ninth day.	Lemon juice at first. Leeches to præcordia; occasional purgatives. Tonics on omission of the opium.	Convalescent. 3 weeks.
18	F. 24	Few symptoms on admission. Next day, severe pain and swelling of ankles and knees, with considerable fever.	Bruit on second day after commencing the opium.	The pain was much relieved after taking the opium for one day; and soon ceased to be the prominent symptom. The bruit persisted, but much less harsh, up to the date of her discharge. She had a copious eruption of sudamina, and some signs of bronchial inflammation.	Day of admission, opium gr. i, comp. coloc. pill gr. ij, every three hours. Two days afterwards, every six hours, drowsiness supervening. Four days afterwards, ordered every night only, and omitted next day.	Lemon juice on third day. Free purging; leeches to præcordia on the occurrence of bruit. Alkalies and ether on omission of opium. Blisters to epigastrium; leeches, etc. On convalescence commenced, salts of iron.	Cured. 6 weeks.
19	M. 18	Great pain in ankles, knees, wrists, and chest. Cardiac affection. 1 fortnight.	Bruit on admission.	The pain continued, apparently unaffected by the opium, and the tongue was very foul. He slept better, however. The urine, which had been acid, became alkaline ten days after admission, by which time the pain had disappeared. It recurred, however, nineteen days after admission, when the opium was again ordered.	Opium gr. i, sesquicarb. of soda gr. xv, sesquicarb. of ammonia gr. ij, every four hours for three days, then omitted; till a relapse of pain occurred on the nineteenth day, when he was ordered opium gr. i, comp. coloc. pill gr. ij, three times a-day, and a few days afterwards, every six hours. This was continued for a fortnight, and then omitted again.	Purgatives. Poppy fomentations on omission of opium. Lemon juice, six ounces daily, and twenty drops of sal volatile every three hours. Ten days after admission, pot. tartrate of iron, with sal volatile, at the same time as the laudanum.	Discharged (nearly well) 8 weeks.

No.	Sex and Age.	Prominent Symptom on Admission, and Duration of Attack.	Heart Affection, when noticed.	Progress of the Case, and complications (exclusive of Cardiac Affection).	Quantity and Method of Administration of Opium.	Other Remedies.	Duration and Result.
20	F. 17	Great pain in all parts of the body, profuse perspiration. Cardiac affection. 1 week.	Bruit on admission.	Great dyspnoea, and symptoms of pneumonia, came on shortly after admission.	On admission, opium gr. i, comp. coloc. pill gr. iiss, every three hours. Omitted in two days.	Alkalies. Leeches to præcordia. Then lemon juice. Purgatives.	Recovered. 10 weeks. Relapsed a few months afterwards. Recovered. 7 weeks.
21	F. 31	Pain in limbs. About 1 week. Irregular action of heart, but no bruit.	Bruit heard next day.	The pain continued obstinate for several days. The bruit continued till near the date of her discharge. She suffered from diarrhoea while taking the opiate.	On admission, opium gr. i, comp. coloc. pill gr. ij, every four hours. Continued for thirteen days; then every night.	Lemon juice, soon omitted. Then alkalies, and when the pain had been subdued, chalybeates.	Rheumatism cured in 4 weeks. Then took small-pox.
22	F. 18	Pain and swelling in ankles, with considerable fever. 1 week.	No bruit.	The pain increased much the day after admission, when the opium was commenced. The pain then soon yielded.	The day after admission, extract of opium gr. i, comp. coloc. pill gr. ij, every four hours. Continued for three days; then night and morning for a week.	Lemon juice some days after admission. Continued after the opium was omitted.	Cured. 5 weeks.
23	F. 17	Swelling and pain of wrists, knees, ankles, and feet. Cardiac affection. 1 week.	Bruit on admission.	Pain, especially in chest, soon subsided, and the swellings of the joints shortly afterwards disappeared. The bruit was still audible when she left the house.	On admission, opium gr. i, comp. coloc. pill gr. ij, every four hours. Continued for five days; then three times a-day. Omitted, on account of his improved condition, on the eleventh day.	Purgatives. Poppy fomentations; leeches to præcordia; alkalies; blisters to chest. On omission of opium, potassio-tart. of iron, with alkalies.	Cured. 5 weeks.
24	F. 25	Great pain and swelling of knees and ankle. Inflammation of the lung. 1 week.	Bruit heard on 6th day.	The pain and swelling were soon relieved, and the opium then (seventh day) omitted. The bruit was transient, and disappeared in less than a week.	On admission, opium gr. i, comp. coloc. pill gr. ij, every four hours, for a week.	Purgatives. Alkalies. On omission of opium, pot. tart. of iron and alkalies.	Cured. 5 weeks.
25	M. 38	Much pain and swelling of all the joints. 4 days. Had opium treatment for 3 days of this period.	No bruit.	The pain and swelling soon subsided. Convalescence rapid.	On admission, opium gr. i, comp. coloc. pill gr. iiss, every three hours for 2 days; then changed, on account of contraction of the pupils, to three times a-day. Changed to two such pills every night, on the fifth day.	Lemon juice. Poppy fomentations.	Recovered. 3 weeks.
26	F. 24	Pain and swelling of the knees, ankles, and shoulders; pain in the chest. 1 week. Fever.	Bruit on 7th day.	The pain continued very obstinate. On the seventh day pleuritic friction was heard, and exocardial bruit on same day. The pain continued obstinate, and she seems to have had little sleep notwithstanding the large dose of opium. She was rapidly improving, thirty-six days after admission, when the notes break off; but the bruit still persisted, and the effusion into the pleura was not quite gone.	On admission, opium gr. i, comp. coloc. pill gr. ij, every three hours for three days; then every hour for one day; afterwards again every three hours; again on 6th day every hour; on 7th, every two hours, with two at bed-time; again every hour on 12th day; every two hours on the 16th; every hour on the 17th. Next day, two pills every three hours; on the 19th day, one every hour; every other hour on the 25th day. Two days afterwards every three hours.	Lemon juice. Then effervescing mixture with alkalies, to which bark was afterwards added. Leeches to præcordia. Blisters to chest frequently repeated.	Notes cease on 36th day, when she was rapidly improving.

REMARKS. The cases which we have tabulated above, together with the five cases of which we gave notes at p. 963, will enable our readers to judge for themselves of the power of large doses of opium in combating acute rheumatism. The first thing that will probably suggest itself is the remarkable absence of any symptoms such as accompany the administration of opium in less painful disorders. We hear hardly anything of drowsiness, of tendency to coma, of constipation or contracted pupils; only, when the remedy is pushed to its extreme point, delirium comes on, which speedily subsides on the diminution of the dose. In some cases, it will be observed that, so far from constipation being produced by the opium, the patient actually suffered from diarrhoea during the opium treatment. In most of the cases, an improvement is reported in the patient's sleep; but this never proceeded to the extent of narcotism. The pain, as might naturally have been expected, was in almost all cases much relieved; but any idea which has

been entertained of the prophylactic virtue of large doses of opium against affection of the heart in rheumatism must, we think, be negated by the table before us, by which it will be seen that, excluding the cases in which the heart was affected before the treatment was commenced, a proportion quite as large as the average suffered from cardiac affection while under the opium treatment. No evidence is contained in the above table as to any immunity from relapses which may be afforded by the treatment. It is curious, however, to observe that the only case which is known to have relapsed (No. 20), was one in which the treatment was abandoned in two days, on account of chest-affection. The patient was again under Dr. Sibson's care, and was treated on the narcotic plan; but the notes were not preserved.

With reference to the administration of other remedies, it seems that the opium does not materially interfere with their action; but on this point we are perhaps hardly competent to

pronounce an opinion, not having had the opportunity of following the cases themselves. The time during which the patients remained in the Hospital does not seem to have been much shorter than under other plans of treatment; but their condition during this time appears to have been more tolerable, their convalescence less protracted, and the cardiac mischief, where present, was in most cases either nearly or entirely repaired before the discharge of the patient.

We have discharged our functions as reporters in laying before the profession as complete a notice as we can collect of a series of cases which we think of much interest; but it is only by those who have themselves treated and watched the patients that such series can be authoritatively generalised; and we therefore leave our readers, to a great extent, to draw their own conclusions. We may be pardoned, however, for expressing a hope that Dr. Sibson will himself apply his large experience in this matter to the resolution of the question as to the value of opium as the principal remedy in rheumatic fever.

Original Communications.

DELIRIUM TREMENS.

By HENRY DUNCALFE, Esq., M.R.C.S., West Bromwich.

[Read before the Queen's College Medical Chirurgical Society, Birmingham.]

DURING our last session it was wisely remarked by our then President, that because a case was one of ordinary occurrence, it was not therefore the less important or practical. Truly believing in this affirmation, I bring before the society a case of delirium tremens, so well marked, and of such severity, that it serves as a good example of one form of the disease, and of a certain line of treatment necessary to be adopted, in contradistinction to an opposite form requiring a *varied* treatment, and to the characteristic symptoms indicative of which I shall hereafter draw your attention.

A retrospective view of the history of disease teaches us that cases where diagnosis has been established beyond doubt, and cases where the symptoms have been uniformly regular, have done more to elucidate the pathology of organism, and the deviation from normal action and healthy structure, than those cases in which peculiarity of form or irregularity of symptoms, have rendered it difficult where to assign the seat of disease.

A consideration of illustrative cases, such as the one I am about to detail, leads us, I believe, to the true and rational treatment of disease. The causes being so well established, the symptoms so in accordance with the disturbed organism, and the necessary treatment so fully indicated.

CASE. A gentleman, of middle age and active habits, who had suffered more or less from hæmorrhage for three years, his appearance being often sallow and cachectic, applied to me to afford him some relief for the increased hæmorrhagic discharge from the bowels. I found him on August 29th with a hot and dry skin, complaining of great loss of strength, impaired appetite, fatigue on making the slightest exertion, and using large quantities of stimulant daily to keep him up to the standard requirements of his daily duties. I prescribed for him a preparation of iron and quinine with hyoscyamus, supporting him with nutritious food as far as his appetite would allow, gradually withdrawing from him some portion of his accustomed stimulants. From such treatment he had found relief on previous occasions; and from the date of my first attendance until September 1st, he appeared to derive benefit from the care bestowed upon him. On that day, I remarked an appearance of anxiety and restlessness about him, and a suddenness in his movements; he answered sharply, and was irritable; impatient of contradiction or restraint, and determined to have his hands constantly employed; his features were hard; his eyes wild, staring, and restless; his tongue was moist and clean, slightly tremulous; the skin, which had been hot and dry, was now hot and moist; the bowels had been acted upon several times, but sparingly, and some blood had accompanied each motion. Towards night he began to have some delusions—seeing birds, monkeys, and other objects, on the walls and ceiling; but when reasoned with, or upon making a closer examination, he could correct the false impressions.

A drachm of laudanum was given to him at bed-time. During the night he was extremely restless; armed himself with a life-preserver, and defended the stairs against the approach of robbers. These nervous fears continued through the day of September 2nd; but when conversed with, he was appeased and quieted for a short time. An opiate mixture was given through the day, and at night a morphia pill. No relief followed; his restlessness increased; and he mistook his friends for foes; and he especially evinced a great antipathy to his wife. He believed everybody had conspired to rob him; and he constantly was employed in hiding imaginary moneys in imaginary safety places. As it would be tedious to give the details of each successive day, I will state in a concise form the medicine prescribed, adverting to any important change as it occurred.

September 2nd. Cinchona mixture, twelve ounces, containing four drachms of tincture of opium, one-ounce doses every two hours. At night, one grain and a half of morphia pill.

September 3rd. Cinchona mixture, containing eight drachms of tincture of opium. A four-grain morphia pill at night, and four drachms of tincture of opium, in doses of a drachm every two hours through the night.

September 4th. A draught containing three grains of morphia; twelve drachms of tincture of opium through the day and night. Before the draught he took two grains of tartarised antimony; and in two hours after it, he commenced taking one-drachm doses of laudanum. He slept irregularly for nearly three hours, and was more composed in the evening. He took food plentifully, and stimulants only in small quantities.

September 5th. A three-grain morphia draught, and a cinchona mixture, with four drachms of tincture of opium.

September 6th. A mixture containing eight drachms of tincture of opium, and three drachms of tincture of opium at night.

Through these days he remained stationary, conversed rationally at times, and slept at short intervals, generally wakening affrighted and trembling. He became gradually more excited through the two following days.

September 7th. The opiate and bark mixtures were omitted. A three-drachm tincture of opium draught at bed-time.

September 8th. A three-drachm tincture of opium draught at bed-time.

September 9th. The bowels having acted but slightly, he had two drops of croton oil in pill, also a blister at the nape of the neck; he resumed his opiate mixture, taking four drachms of the tincture during the day, and three grains of morphia in a draught at night.

September 10th. Mixture containing nine drachms of tincture of opium.

September 11th. Four-grain morphia pill. Mixture containing six drachms of opium through the day.

September 12th. Croton oil pill. Mixture of hyoscyamus, sulphuric ether, and camphor; at night, a two-grain morphia pill.

September 13th. Three-drachm tincture of opium draught; ether and hyoscyamus mixture.

September 14th. Three-drachm tincture of opium draught; ether and hyoscyamus mixture.

September 15th. Mixture repeated. A three-drachm tincture of opium draught; and half a grain of morphia every two hours, till he had taken four grains.

September 16th. Mixture repeated. A three-drachm laudanum draught.

September 17th. Bark and hyoscyamus mixture. To take solid food, and then change from home.

My note-book bears entry on Sept. 10th:—"He has not been so much disturbed by delusions as in the earlier days of the affection. His perceptions are more accurate; his aversions to those around him are the exciting causes of his illusory wanderings; his repugnance and aversion to have even his wife in the room are marked; he rages and shrieks loudly for help, tears his clothes, abuses those who touch him, refuses food, and demands to be taken from the prison in which he is incarcerated." Day following day and night succeeding night, found no change in this fierce delirium. The pulse was quick and sharp; the breathing hurried and panting; the skin hot and bathed in perspiration; the constantly increasing ramblings, restlessness, and wandering, continued almost unaltered till the 15th, when a slowly but well marked change took place. The violent gesticulations were now falling into a groping about in space for imaginary objects, and the wild delirium was merging into the low mutterings of incoherence. He was now brought to that state of exhaustion when a short time must