case seems to be altogether of a different nature, as no evidence of tubercular disease of the lungs existed.

The most curious circumstance connected with the case is the fact, that the patient's complaints were chiefly connected with the stomach; indeed, the symptoms were not unlike those of chronic ulcer of the stomach. The house-surgeon also thought, and not without some reason, that the hæmorrhage was from the stomach, although the fluid character of the blood and the cough certainly militated against that view. Dr. Paget had not an opportunity of seeing the case subsequently to the supervision of the hæmorrhage.

Cambridge, December 1870.

COD-LIVER OIL.

By J. M. WINN, M.D.,

Senior Physician to St. George's and St. James's Dispensary; late Resident Physician to Sussex House Lunatic Asylum; etc.

THE utility of cod-liver is so universally admitted, that it may seem idle to say anything more in its favour; nevertheless, its *modus operandi* is so imperfectly understood that I make no apology for offering a few remarks which have occurred to me whilst watching its effects on the various forms of hereditary disease that have lately come under my notice.

Some of our best writers on therapeutics attribute its efficacy chiefly if not solely to its dietetic properties; in fact, they regard it rather as an article of food than as a medicine: they apparently come to this conclusion principally on account of the very trifling quantity of iodine and bromine found in the oil—these amount to only .05 per cent; and it is, indeed, scarcely to be supposed that so small a proportion of these elements could have any appreciable effect. However this may be, the marvellous curative power of cod-liver oil cannot be explained by any theory based on its chemical constituents. Its effects, as an active remedy, are unmistakable; and it seems to have especial power in arresting the morbid force which obtains in phthisis, scrofula, skin-disease, and other hereditary affections.*

The prevalent notion that cod-liver oil acts chiefly as a nourishing article of food, has often led to the neglect of its use in cases where the disease is not attended with loss of fat and muscle, and it has also led to its administration in unnecessarily large and nauseating doses. Experience, however, has shown that very small quantities suffice to produce beneficial results. I never myself prescribe more than one drachm for a dose.

The following example is a remarkable illustration of the value of cod-liver oil in a case that appeared, at first sight, an unpromising one for its use.

A child, six years and a half old, was brought to me dreadfully disfigured by an eruption of eczema impetiginodes over the forehead, nose, lips, and left cheek. She was one of the largest and most robust-looking children I ever saw, and her muscles were firm and well developed. She was the daughter of Jewish parents; and I was informed that her brothers and sisters were all on the same large scale. Attributing the disease in a great measure to a plethoric condition, I prescribed aperients and alkalies; and as she was in the habit of eating very heartily of animal food, I reduced her allowance of meat. After continuing this plan for a fortnight, there was no amendment: I then changed the treatment, and ordered one small teaspoonful of cod-liver oil three times a day. The effect was immediate, and in about a fortnight the eruption had disappeared, and the child was quite well in every respect.

A case which I am now attending will serve to show that all the beneficial effects of cod-liver oil may be produced by the use of very small quantities, even on full-grown persons of very large proportions. The patient is an ex-Life-Guardsman, above six feet in height, suffering from tubercular disease. He appeared to be in a sinking state, but has now rallied far beyond my expectation from the use only of one drachm of the oil three times a day.

From these and similar instances of constant occurrence, I infer that cod-liver oil does not act as a mere article of food; neither is it a simple tonic, like iron or gentian, but that it has a specific virtue of its own—in short, I would suggest that cod-liver oil is to hereditary affections what quinine is to zymotic diseases.

Harley Street, December 20th, 1870.

* On the principle that cancer and struma are mutually convertible, I have lately been testing the effects of cod-liver oil in cases of cancer, but have not tried it long enough to arrive at any positive result.

CLINICAL MEMORANDA.

OBSCURER DISEASE OF THE CÆCUM.

I HAVE recently met with a case which bore a close resemblance to those described under the above title, by Dr. Chambers, in the last number of the JOURNAL; and, on account of the peculiar nature of this affection, a few details may be interesting.

The diagnosis between a tumefaction arising either from a fæcal collection or an organic tumour, and that from the affection alluded to, will probably not be very difficult; but it is a much more puzzling matter when we come to decide whether the swelling be due to the formation of an abscess in the perityphlitic tissue, or to the much less serious affection described by Dr. Chambers. Of this difficulty the following case is, I think, a good illustration.

A gentleman of middle age had been travelling a good deal, exposed to cold, and more or less "out of sorts" for three weeks. Some days before I saw him, he began to complain of tumefaction and pain in the right iliac region, the pain sometimes extending down the thigh and into the testicle of the same side. There was no history of constipation; and the bowels had been freely acted on by castor-oil. He had at this time nausea and a furred tongue; the pulse was 88, and temperature 100.8 deg. The next day, he complained of having had a very restless night, and also of more pain at the seat of swelling; the pulse had risen slightly; and the temperature was 101.8 deg. He was ordered to have a warm hip-bath and a chloral draught at bedtime. From the combined effect of these he experienced much relief; he slept soundly, and awoke, as he said himself, "altogether better." When I saw him in the afternoon, the iliac swelling had decreased; pressure there was much better borne; the bowels had acted naturally; and the temperature had fallen to 96.6 deg; it remained between this point and 97 for five days (time of observation, 4.30 P.M.), except on one occasion, when, during spontaneous free action of the bowels, it rose to 98.8. During this time of low temperature, the swelling and pain gradually subsided, and convalescence proceeded without a relapse; quinine and iron being the remedies used. In this case, up to the time of the sudden improvement and fall of the temperature, I certainly feared the formation of an abscess. Subsequently, I thought it must have been due to a fæcal accumulation; though the absence of any history of constipation, the high temperature, and the character of the stools, always rendered this explanation unsatisfactory to me. Since the perusal of Dr. Chambers's communication, I am inclined to look upon this curious affection as being of the nature described by him.

Hull, January 9th, 1871.

GEORGE F. ELLIOTT, M.D.

EPILEPTIC MANIA CHECKED BY CHLORAL HYDRATE.

THE patient was a retired publican, 60 years of age, rather given to drink. She had suffered from epilepsy for very many years—generally the *petit mal*, which attacked her in her sleep. She had only had three attacks of the *grand mal* before the present one. I saw her only in this last and the last but one; this latter occurred twenty months since. She was universally convulsed, insensible, and bit her tongue. The convulsions lasted about an hour and a half. She was maniacal and sleepless for sixty hours; and drugs had no effect on her.

I was called to see her on December 18th, at 11 P.M. She had been in perfect health up to 5 P.M., when she complained of headache and went early to bed, quite sober. At 10.30 P.M., when asleep, she was suddenly convulsed; and I saw her at 11 P.M. She was lying on her back; the lips and eyelids were half open, the lips drawn to the left side. She had clonic spasms of all her limbs, most marked on the left side. The conjunctiva were insensible. She continued in this state till midnight, when she became partially sensible, and I gave her a draught containing twenty-five grains of chloral hydrate. She soon fell asleep, and slept soundly till morning, when she was sane, and only complained of weakness. She is now (Dec. 22) well.

This may be contrasted with the case of a man who in a fight received a fall, and has since (fourteen days) been suffering from pain in his head and complete loss of the use of words. He was sleepless for the first few nights; but I found that chloral, instead of giving him rest, made him restless and excited, so that, after repeated trials, it had to be given up. There is no external injury to his head, but he cannot express himself at all correctly. He can say words, but they simply escape from him without his having any control over what may come. He cannot read aloud, but understands to some extent the power of words, and can tell if they be read.

Alston, Cumberland.

GEO. H. SAVAGE, M.D. Lond.