Illustrations OF HOSPITAL PRACTICE: METROPOLITAN AND PROVINCIAL.

ST. MARY'S HOSPITAL.

CASES OF CHOREA.

By C. HANDFIELD JONES, M.B., F.R.S., Physician to the Hospital.

CASE I. J. S., aged 17, male, plumber, was admitted February 26th, with chorea pretty severe; tongue rough and white; pulse excited, weak. He has been affected two months, in consequence of fright at seeing a man hang himself. He had chorea three years ago. The right side is most disordered. Treated at first by carbonate of iron and cold douche, subsequently by liquor potassæ arsenitis, he got gradually better; but the influence of remedies was not marked.

CASE II. E. M., aged 16, female, admitted April 12th with chorea, which at first affected the right side most, but had become general. She used to start and wake up at night in fright. Catamenia regular; bowels regular. No worms. Some psoriasis on lower lip. Treatment for fourteen days by liquor potassæ arsenitis, without advantage; afterwards by one-twentieth of a grain of strychnia three times daily, under which she got well in five or six weeks.

CASE III. E. C., aged 12, female, was about six months under treatment for psoriasis, in the course of which chorea showed itself, affecting the right leg and arm. Under liquor potassæ arsenitis and an issue in the right arm, both disorders got well.

CASE IV. H. L., aged 10, male, was admitted April 16th with severe chorea; "is not still a moment". He had been ill fourteen days. Liquor potassæ arsenitis was given for a week, and castor oil. Lichen urticatus then appeared. Half a grain of ammonio-sulphate of copper was given three times daily.

April 30th. No improvement. Eruption same. One-twenty-fourth of a grain of strychnia was given thrice daily; this was continued, after fourteen days, four times a day till July 9th, when both chorea and eruption were much improved. He ceased attendance August 20th, when he was free from chorea, but had still some eruption.

CASE V. C. W., aged 12, female, was admitted Nov. 24th. She had been ill three weeks with marked chorea. Circulation languid. She was treated by the carbonates of iron and ammonia, with valerian; and was cured in about a month.

CASE VI. E. W., aged 13, female, was admitted Dec. 29th. Ill four weeks. The left side is affected; the arm feels weak, and twitches at times; and the three inner fingers feel numb, and get contracted. The leg is at times jerked out; it is less strong than the other. The mouth is occasionally drawn to the left; speech altered. Memory not so good as formerly; is very forgetful and languid. Head giddy this morning. No catamenia yet. Treated at first by carbonate of ammonia, ammonio-citrates of iron, infusion of valerian; and subsequently by strychnia and tincture of sesquichloride of iron. By Feb. 13th she was well enough to be discharged.

CASE VII. W. C. P., aged 18, male, was admitted April 23rd, with chorea affecting right side, arm, leg, and face. Speech interfered with. Bowels regular. He had been ill three weeks. Treated by carbonate of ammonia, ammonio-citrate of iron, tincture of henbane, infusion of valerian; subsequently by strychnia and quinine. He improved under both, but was not well when he ceased attendance.

CASE VIII. E. H., aged 11, female, was admitted

March 7th, with chorea affecting chiefly arms and hands. Till 28th, she had mistura ferri composita; afterwards strychnia, increased gradually from one-sixteenth to one-eighth of a grain thrice daily. Shower-bath for part of the time. She was almost well by April 25th.

CASE IX. Ph. C., aged 8, female, was admitted Oct. 26th, with marked chorea, not more on one side than the other. Cannot feed or dress herself. Fright was said to be the cause. Treated with benefit till Nov. 23rd by one-twenty-sixth of a grain of strychnia thrice daily, and saccharated carbonate of iron; afterwards by citrate of iron and quinine and tincture of nux vomica.

Nov. 23rd. She was said to have lost the use of her right arm, leg, and side, for a week (having been without medicine the same time). She had regained the use of the arm; but the left had become affected, as well as her speech.

Dec. 17th. Has benefited much; speech is regained; and she is much more steady.

CASE X. L. H. L., aged 8, female, was admitted Dec. 13th. She had been ill ten days. A healthy child, not anæmic. Skin cool; pulse weak; bowels regular; appetite very good. Has most marked chorea of both sides, which came on suddenly while returning from school. Is quiet while asleep, as regards movements; but at night cries, and is semi-delirious, not conscious where she is. She cannot sit in a chair without being fastened to it. Heart's action very excited; a loud systolic mitral murmur, and perhaps a basic. Never had rheumatism, or anything like it. Urine rather high coloured and thick.

Dec. 24th. Much improved, sleeping a great deal better. Choreic agitation still very marked; heart's sounds as before.

Jan. 24th. Is quite steady; walked to hospital.

April 4th. Discharged in very fair health; heart's sounds same. Treated by citrate of iron and quinine, liquor potassæ arsenitis, with tincture of nux vomica and cod-liver oil, with occasional aperients.

CASE XI. Same girl readmitted July 18th, having relapsed about fourteen days. Movements not steady. Loses her speech at times, and bursts into fits of crying, after which she is better. Appetite bad; bowels right. One-thirty-second of a grain of strychnia was given three times a day.

Aug. 1st. Is quite steady, but loses her speech four or five times a day. One-twenty-eighth of a grain of strychnia thrice daily.

Sept. 4th. Is quite steady, and her speech is good. One-eighteenth of a grain of strychnia and seven minims of tincture of sesquichloride of iron were given thrice daily.

Dec. 29th. Good colour. Is very fairly well. Breath not short; she runs about.

CASE XII. M. H., aged 11, female, was admitted Oct. 24th. She had been ill two months. Right side, arm, and leg, said to be partially paralysed. Drags her leg; cannot hold anything with right hand. Tongue drawn to one side. Pulse quick; pupils very large. Sleeps well; appetite good. From one-twenty-fourth to one-twentieth of a grain of strychnia; ten to fifteen minims of tincture of sesquichloride of iron; four minims of chloric ether; and one minim of hydrochloric acid, were given in half an ounce of water thrice daily.

Dec. 19th. Is quite recovered.

REMARKS. Of the above twelve cases (one being a relapse), nine were females, three males. As to age, three were between the ages of 5 and 10 years, six between 10 and 15, and three between 15 and 20. All were under my own care, except Case VIII; and they are all that I have recorded among a total of 2500, which gives a proportion of 1 to 208, a smaller than might have been expected, considering the great prevalence of nerve-disorders. In only one case was there complication with cardiac disease, the mitral valve being affected; and in this it seems clear that there was no prior attack

of rheumatism. If the cardiac disease, at any rate, was of rheumatic character, it must have been the sole manifestation of the disorder. In some of the cases—VI, IX, and XII—the nerve-affection had as much the appearance of paralysis as of convulsion, the loss of power being the more conspicuous phenomenon. This seems to me a very interesting observation, and highly significant as to the real nature of the disorder. Another noteworthy circumstance is the tendency to oneness in the chorea, reminding one of the results of organic disease. From these and other observations, I am satisfied that separate nervous centres may be the seat of local functional disorder, just like individual nerves. We may as well have a neurosis of one hemisphere as of one sciatic nerve. For want of such knowledge, two most eminent authorities in the profession treated a case of transitory hemiplegia connected with ague by bleeding and mercurialisation.

All the cases were treated by nervine tonics of one kind or other; purgatives being sparingly employed, only to remove constipation, or to correct faulty secretions. In eight cases, strychnia was used, and seemed more or less beneficial in all. In Cases II, IV, VIII, XI, it was undoubtedly the main cause of the improvement. A combination such as was used in Case X may often be advisable. In acute cases marked by extreme excitability and involuntary jactitation, sedatives are unquestionably indicated; but they can only obtain a temporary advantage, and it is to tonics that we must look in the great majority of cases for a real cure.

With regard to the essential nature of chorea, it seems to me that we shall not be far from the truth if we keep in mind the well established law, that usually mobility and debility of nervous tissue go hand in hand, that the weak structure is unduly sensitive and excitable. To determine the exact seat of the affection is not possible; and very probably it is not confined to any one locality. It is much more important to know the state of the nervous structures; and this, it seems pretty certain, is one of debility and exhaustion. This is the radical and necessary condition; but the causes which produce it may be very various. In the majority of cases, the nervous tissue falls of itself into a state of enfeeblement, or is reduced to it by ordinary influences, as bad air, poor food, depressing emotions, etc. In other cases, the impairment of nervous energy depends on worms or accumulations of feces in the bowels, which, on the principle of inhibitory action or morbid stimulus, depress and enchain the nerve-force. In other cases, possibly some poison, by circulating in the blood, may conditionate the state of nerve-debility. The treatment must, of course, vary according to the presumed cause.

The connexion between chorea and rheumatism seems to be in some degree elucidated by viewing the latter as a disease in which the nervous system is materially involved. Without denying that acute rheumatism may depend on the presence of lactic acid in the blood, it yet seems clear that the ordinary inflammations of rheumatism manifest peculiarities which can scarcely be accounted for except by the intimate concernment of the nervous system. Rheumatic affections shade, in fact, from the most decided severe, local, pus-generating inflammations of pericardium or lungs, down to mere neuralgia with little or no vascular disorder. The more fugitive and shifting they are, the more of the nervous element one traces in them. This is not the place to discuss at length the arguments for this view; but if it be admitted that a state of paresis of the nervous system is common both to chorea and rheumatism—in one the cerebro-spinal department being affected, and in the other the vaso-motor—we have at once an important relation established between them. The inflammations of rheumatism might result from the mere paralysis of the articular vaso-motor nerves, without the presence of lactic acid in the blood; or, assuming that this is essen-

tial, its injurious effects might be greatly intensified by this nerve-disorder, or even developed in cases where otherwise they would have remained wanting.

HULL GENERAL INFIRMARY.

REPORTS OF CASES.

[Reported, with Remarks, by C. J. EVANS, Esq.]

I. ABSCESS OF LUNG FROM PRESENCE OF FOREIGN BODY: EVACUATION THROUGH BRONCHIAL TUBES AND THROUGH THORACIC WALLS: RECOVERY.

GEORGE JOHNSON, aged 26, a blacksmith by trade, was admitted, under the care of Sir Henry Cooper, on April 5th, 1860, in a state of great debility and exhaustion. He was emaciated, and had an anxious countenance; and expectorated a large quantity of pus. There was a swelling at the level of the seventh rib on the left side, about four inches from the sternum, the integument over it being thinned and livid, with fluctuation—evidently an abscess on the point of bursting. He enjoyed good health up to the end of 1859. At that time he swallowed, during a meal, a portion of bone from a sheep's head, about half an inch long by one quarter broad. He was choked by it, and went immediately to a surgeon, who could not feel the bone, and did not remove it. He brought up a little blood at first; and cough, attended by expectoration, followed. A few days after swallowing the bone, he expectorated pus, which gradually increased in quantity. At the end of a month, as he got thinner and weaker, the expectoration of pus continuing, he put himself under the care of a medical man, and remained under treatment up to the time of his admission into the Infirmary. During all this period (two months or more), he expectorated pus to the amount of a pint every twenty-four hours; and most of the time he was confined to his bed. About six weeks after swallowing the piece of bone, he ejected it during a violent fit of coughing, to which attacks he had become subject. A month before admission, he felt a pain in his left side; and a swelling made its appearance, and gradually increased in size. He was seen by Sir H. Cooper in consultation a short time afterwards, when the abscess in the side had presented itself.

On admission, the right side of the chest was healthy; on the left side the natural respiratory sounds were audible about halfway down, the region of the abscess and parts immediately surrounding presenting dulness on percussion, and absence of respiratory sound. There were no signs of tubercle in either lung. He was ordered to take an ounce of expectorant mixture three times a day, and a pill containing half a grain of muriate of morphia every night; and to have a linseed-meal poultice applied to the side.

April 6th. He expectorated a large quantity of pure pus. One-third of a grain of opium was given in a pill every six hours.

It was considered not advisable to open the abscess with a lancet. In a few days, it opened spontaneously, and discharged copiously; but the pus evacuated in this way was thinner than what was expectorated. At the same time, the sputa became less abundant; these, and the discharge from the side, evidently bearing a relation to each other. The natural respiratory murmur was now to be heard much lower down on the left side.

April 12th. His condition generally had much improved; he slept well, his appetite was good; the expectoration was less copious, and he was gaining flesh. He was ordered to have the opium pill every night, and full diet.

He continued to progress favourably and steadily through the month of April, all expectoration at last ceasing, and the opening in the side healing over; he also became much stouter, and was discharged cured on May 10th.

REMARKS. This interesting case furnishes good evi-