matter was discovered in any part of the body. The following was Dr. Ferrier's report of the part sent to him.

The base of the brain (including all the structures comprehended in the circle of Willis) was involved in a semipurulent mass enclosed in meshes formed by recent adhesions. The lips of the Sylvian and longitudinal fissures were glued together, and the cortical matter softened by similar tuberculous exudation. On dissecting down and tearing through the adhesions, the circle of Willis and its branches were found to be thickened with tubercular thickenings of the adventitia, and embedded in semipurulent matter. The exudation accompanied the anterior and middle cerebral arteries in almost their whole extent. The gyrus fornicatus, the island of Reil, and the convolutions overlapping it on each side, were coated and softened with tubercular matter. The posterior cerebral arteries were similarly involved, and the exudation extended round the crura cerebri on to the superior surface of the cerebellum. The membranes on this situation were studded with miliary tubercles, especially on the right side. The blood-vessels were pervious apparently in their whole extent. The vessels of the corpora striata were not occluded; but both corpora striata were considerably congested, especially the right. The torn-out vessels were filled with fluid blood. No embola could be detected. The spinal cord was not examined.

THE TRUE AND FALSE CROUP OF FRENCH PATHOLOGISTS.

By GEORGE JOHNSON, M.D., F.R.S.,
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IN the last number of the JOURNAL, Sir John Rose Cormack reiterates his statement that the "faux croup" of the French is synonymous with our English terms "laryngismus stridulus" and "spasmodic croup". "It is," he says, "a neurose, and not an inflammation." And, on the same page of the JOURNAL, Dr. Risdon Bennett maintains that Sir John Rose Cormack is right, and that I am wrong in denying his accuracy. Let us, then, look at the evidence in proof of this position. Sir J. R. Cormack quotes several French writers; and first he gives from the *Dictionnaire de Médecine*, etc., a passage, the essential part of which I venture to translate as follows.

"STRIDULOUS LARYNGITIS, OR SPASMODIC CROUP, OR FALSE CROUP.—Stridulous laryngitis, a disease apparently bordering on croup as regards the age of the patient and the attacks of suffocation which characterise it, is only a *neurosis of the larynx grafted upon an acute laryngitis*."

Now, upon this passage I remark, that the name of the disease, "stridulous laryngitis", implies that it is an *inflammation* of the larynx; and Sir J. R. Cormack's statement, that it is a neurosis, and not an inflammation, is in direct opposition to the passage which I have placed in italics.

The second authority quoted I translate thus:

"STRIDULOUS LARYNGITIS. Syn.: False croup (Guersant); stridulous angina (Bretonneau); spasmodic laryngitis (Rilliet and Barthez). The spasm of the larynx which constitutes, properly speaking, one of the elements of stridulous laryngitis, may exist alone, and differs from it then only *in the absence of the primary or concomitant laryngeal catarrh*."

Here, again, we have the disease named and described as an inflammation of the larynx complicated with spasm, as we know that acute laryngitis—in children especially—usually is. No one surely would maintain that the spasm without the laryngeal catarrh is the same disease as catarrh with the addition of spasm.

I propose now to refer briefly to those unquestionable French authorities on this subject upon whom I rely in support of my statement that their "faux croup" is *not* identical with our spasmodic croup or laryngismus stridulus, as Sir J. R. Cormack and Dr. Bennett maintain. I suppose it will be admitted that the "true croup" of the French pathologists is by them defined as a diphtheritic membranous laryngo-tracheitis. It will be conceded that, upon this subject, Trousseau is as high an authority as can be quoted; and he describes "true croup" as a product of diphtheria. What, then, according to Trousseau, is "false croup"? His lecture on this subject will be found in the third volume of his *Clinical Medicine* (p. 72, New Sydenham Society's translation). The title of the lecture is, "Stridulous Laryngitis, or False Croup". Will Sir J. R. Cormack and Dr. Bennett maintain that the subject of that lecture is what we in England call spasmodic croup or laryngismus stridulus? Will they deny that the disease there described is an acute catarrhal laryngitis—what we in this country should call simple inflam-

matory croup, as distinguished from diphtheritic croup? The disease which we English call spasmodic croup, and sometimes false croup, is described by Trousseau as a neurosis in connexion with infantile convulsions, under the names of "laryngismus stridulus" or "thymic asthma" (vol. i, pp. 354-5, New Sydenham Society); and all French authorities of eminence are entirely in accord with Trousseau as to the pathology and the nomenclature of these diseases. On a disputed question of this kind, it is not usual to quote, as Sir J. R. Cormack has done, a grinder's cram-book.

Dr. Risdon Bennett quotes a passage from Guersant on "stridulous laryngitis" or "false croup", and assumes that the disease there described is laryngismus stridulus or spasmodic croup; whereas, to any one who will take the trouble to read the context, it must be obvious that Guersant is referring to simple inflammation of the larynx, which he contrasts with the specific diphtheritic membranous inflammation. Is it conceivable, that any French pathologist would describe a pure neurosis of the larynx under the name of laryngitis? Dr. Bennett's misinterpretation of the term "false croup", which Guersant states that he first proposed as a substitute for that of "the acute asthma of Millar", has probably been favoured by his erroneous belief that "Millar's asthma" is synonymous with "thymic asthma" or laryngismus stridulus". With reference to this mistake, I quote the following from Trousseau (New Sydenham Society's translation, vol. i, p. 355). "I need not remind you of the distinction between *thymic asthma* and the *acute asthma* of Millar; the latter is stridulous laryngitis, in which the spasm of the larynx which characterises it is due to an inflammation of the respiratory tract."

If, then, I am wrong in my statement that the stridulous laryngitis or false croup of French pathologists is an inflammatory disease, with or without spasmodic complication, and not a purely spasmodic laryngismus stridulus, I err in the very respectable company of Trousseau and Guersant, and I may add, of Bretonneau, whose doctrine is identical with theirs. I would ask Sir J. R. Cormack this question: If the disease which the French writers designate stridulous laryngitis or false croup be not identical with our catarrhal laryngitis or inflammatory croup, under what name do they describe our English inflammatory croup? Do they omit it entirely, as he omitted it from his proposed nomenclature of diseases allied to croup?

With regard to the relation between croup and diphtheria, Dr. Bennett says, "The absence of all reference to paralytic symptoms in the older writers is remarkable". Still more remarkable is the absence of all reference to these symptoms in the elaborate and for the most part accurate and exhaustive memoirs of Bretonneau on *Diphtheria*.

Before I conclude, I desire to point out a mistranslation which, to English readers of Trousseau's *Clinical Medicine*, may be very perplexing. In the second paragraph from the bottom of page 477, vol. ii, reference is made to "the cough of laryngismus stridulus or false croup". Here the term *laryngismus stridulus* is the translator's erroneous substitution for *laryngite striduleuse*; so that, by the mistranslation of this passage, it is made to appear that Trousseau employs the term laryngismus stridulus as a synonym for false croup. No argument is needed to show that the conversion of the French *laryngite* into the Latin *laryngismus* is unauthorised and misleading. The sound is somewhat similar; but the sense is as different as that implied in the words "inflammation" and "spasm". The passage in the original French occurs in Trousseau's lecture (xix) on Diphtheria, vol. i, at the top of page 342, 2nd edition.

A NOVEL TREATMENT OF OBSTINATE VOMITING IN PREGNANCY.

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IN furtherance of the views I expressed at our last annual meeting of the Association, that *practical knowledge should be freely communicated to the profession through our JOURNAL*, and which I still urge upon the attention of our members as a valuable means of effecting improvement in the treatment of disease, I forward three cases which have occurred recently in my own personal experience, and which, if further corroborated, may open a wide field of usefulness in the treatment of a very obstinate, rebellious, and sometimes fatal form of sympathetic disorder. The disease to which I refer is urgent sickness in connection with pregnancy, which is now and then so severe as to render premature delivery necessary to save the life of the mother. During a long professional life, I have had much experience of this troublesome affection, and amongst medicines have found calumba and oxalate of cerium the most beneficial; but these and all other medicines often fail,