often have I had patients sent up to me from the country, especially from some of the damp close valleys in the West of England, where asthma is very rife; and their troubles have sometimes ceased the first night they passed in town, even before they had seen me, or undergone any special treatment. In most, however, the improvement is more gradual; and here I cannot forbear mentioning a remarkable case of a gentleman aged 55, sent to me by Mr. Mules of Ilminster, after reading my lectures on Asthma, published in the *Lancet*. It was a case of arrested phthisis of twenty years' standing, with considerable consolidation of the right lung; but the patient had been free from cough for many years till the last three winters, and since the last winter he had been subject to distinct attacks of spasmodic asthma, which came on each night, and passed away in the morning. After an attack of inflammation of the lungs in the summer, the fits became more frequent; and the breathing was so bad, that he was confined to his room, and generally to his bed; and he had not lain down or slept soundly for several months. He had tried stramonium, tatala, belladonna, opium, and a number of remedies, with only temporary relief. When I saw him (October 17th), his breathing was slow and difficult; and the least movement, even walking from the cab into my consulting-room, produced a spasm. His legs were cedematous, and the urine scanty, high coloured, highly albuminous, but of good specific gravity (1024). Besides the partial consolidation, there were signs of extensive emphysema, and abundance of wheezing and sonorous rhonchi over the entire chest. The asthma gradually subsided without the aid of antispasmodics. He slept two hours the first night in town, in Hanover Square, and gradually increased this amount until, at the end of ten days, all spasm had disappeared, and he slept well and soundly. Under the use of diuretics, the cedema and albuminuria vanished in three weeks, and the extent of emphysema in the chest was considerably reduced. He remained in London, under my charge, for three months, and regained his former vigour, being able to walk for several miles daily, and to enjoy life. The presence of albuminuria and dropsy in this case can hardly be ascribed to any other cause than the obstruction to the circulation which the asthma and emphysema gave rise to, inducing some dilatation of the heart and congestion of the kidneys; for, on this obstruction being removed, the renal symptoms disappeared.*

I think, therefore, that, for asthma at least, a claim may be put in for the climate of smoky old London, the peculiarities of whose atmosphere are, first, its dryness; second, its containing less oxygen, and more carbonic acid and free carbon, than that of the country; and these properties exercise a deadening influence on the neurosis of asthma.

The medicines useful for neurotic asthma are chiefly antispasmodics, and these may be divided into stimulant and sedative. Under stimulant, I include alcohol, strong coffee, and such medicines as spiritus ætheris and nitrite of amyl. I do not find these, as a class, so successful as the sedative antispasmodics, though occasionally spiritus ætheris and coffee have given relief. The nitrite of amyl has generally failed in my hands, and it is a very dangerous medicine to entrust to patients.

The sedative class is a large one, embracing as it does stramonium, belladonna, Indian hemp, lobelia, tatala, tobacco, and many others; and, whether smoked or taken internally, these will occasionally work wonders. The various pastilles and papers are often effective; most of them, like the famous nitre-paper, producing, by their combustion, carbonic acid, and thus providing us with a concentrated form of town-atmosphere. In the most severe spasms, almost everything fails, because it seems impossible to introduce drugs into the system through the mouth. Here, hypodermic injection of morphia or atropine often gives instantaneous relief; but it is not admissible if much emphysema be present. The same rule applies to chloroform. Ether, or possibly spiritus ætheris, may be tried in these cases, where, by the bye, I have found emetics fail. Where there is no marked lividity, chloroform generally gives signal relief, from twenty to sixty drops being usually sufficient. As this, however, is unsafe to trust to the patient himself, I tried chloral-hydrate, and with such good results, that I freely recommend it. In slight cases, it should be administered in doses of twenty to thirty grains once or twice in the night. In severe cases, fifteen or twenty grains should be given every three or four hours until sleep is induced. In by far the majority of instances of neurotic asthma, this treatment has succeeded in allaying the spasms, and in diminishing, or even abolishing, the attacks. For particulars of several cases treated by chloral, I must refer you to the forthcoming volume of the *Clinical Transactions*, where I have recorded some remarkable instances, and would strongly urge you to give a fair trial to this method of treatment.

* This patient afterwards returned to Somersetshire, and remained tolerably well till the hot weather, and luxuriance of vegetation induced thereby, caused a return of the asthma, and necessitated a withdrawal to London.

PENETRATION OF BOWEL BY A STAB: RECOVERY.

By WILLIAM COOPER, M.R.C.S., Widnes, Warrington.

AT midnight, on November 2nd, I was called to see T. B., a farm-labourer, thirty-five years age, who had been stabbed in a drunken fight. On arriving at the patient's home, I found him lying on a bed, nearly pulseless, and suffering from great collapse. On examining him, I found three incised wounds on the left side of the abdomen, and one on the buttock (this was only a flesh-wound). Through the lowest and largest of the abdominal wounds, which was situated midway on a line from the umbilicus to the anterior superior spine of the ilium, there protruded about five feet of intestine. On examining this carefully for perforations, I found two corresponding incisions in the intestine: one, where I suppose the knife entered, measuring about one inch and a half; while the one where it emerged was about one inch in length. The two smaller abdominal wounds lay on a level with the umbilicus, about two inches apart. These had both penetrated the abdominal cavity, but no bowel protruded; only a small piece of omentum, through the one nearest the umbilicus. After administering a little brandy, the patient rallied; and then, after sponging the intestine, and removing all clots from the interior of the bowel by gentle pressure, the wounds in the intestine were closed with a very fine silk thread, and the bowel returned, to do which, the enlarging of the external wound was found necessary. The omentum protruding from the other wound having been pushed back with a director, the external wounds were closed with sutures, and a pad of dry lint placed over them. No chloroform was given, as, on attempting to administer it, his pulse sank rapidly. There had been great hæmorrhage from the largest wound; he was, therefore, ordered half an ounce of brandy in a little milk every two hours; and, having in the course of a few hours rallied sufficiently, he was given two grains of powdered opium, and one grain was ordered to be taken in three hours, and repeated if required.

November 3rd, 9 A.M. He had slept two or three hours during the night. He complained of pain on pressure, mostly on the right side, where, he told me, he was kicked. He had some difficulty in passing urine. Pulse 82. Temperature nearly normal. I ordered ten minims of tincture of opium, and ten minims of spirit of nitrous ether every four hours. 4 P.M. His urine was passing freely. Pulse 86. There were more pain and tenderness. Temperature higher. Hot fomentations were ordered to be applied to the abdomen. He was given ten minims of tincture of opium and half a drachm of dilute solution of acetate of ammonia every two hours. The brandy and milk were continued.

November 4th, 10 A.M. He passed a restless night. Pulse 90. Temperature the same. The tongue was coating. The pain and tenderness were increasing. The treatment was continued. 3 P.M. He was little altered. Pulse 94.

November 5th, 9 A.M. He had a very restless night. Vomiting set in at midnight. The tongue was very foul. The pain was still increasing. Pulse 97. Temperature higher. I ordered a grain each of powdered opium and calomel every three hours, and the fomentations to be carefully attended to. 3 P.M. He complained very much of the right side. The vomiting was little better. He was ordered soda-water instead of milk. Pulse 94.

November 6th, 9.30 A.M. He had a bad night. The vomiting increased, and there was great tenderness. Pulse 95. The temperature was no lower. He had some difficulty in passing urine. Gin was substituted for brandy. I ordered the dose of calomel in the pills to be increased by one grain in each pill. About half an ounce of castor-oil was given. 4 P.M. He had a small motion. The symptoms were relieved. Pulse 89. The vomiting was less violent; and he felt easier.

November 7th. He passed a better night. The bowels were relieved twice. The tongue was cleaning nicely. Pulse 86. The vomiting ceased. The temperature was much lower. I ordered strong beef-tea, and brandy and egg mixture every four hours alternately, and plenty of milk. The pills were stopped, unless when required.

November 8th. He passed a good night. Pulse 82, and stronger. Tongue cleaner. The bowels were acting regularly. The beef-tea and milk were continued; the brandy was stopped. A small piece of bread with egg was allowed. November 9th. He was passing good nights. The bowels still were regular. He was ordered oatmeal porridge, and a small mutton-chop for dinner. From this time he made a rapid recovery, and was sitting up on November 13th, it being the tenth day of his illness. There remained a small hernial protrusion. A truss was applied on November 16th. I may state that his assailant received, very properly, a sentence of ten years' penal servitude.