forward. On getting better, he continued on duty for about three months, during which he was under the care of the divisional surgeon, who cupped him on the back and prescribed for him, but without relief. Some time afterwards, he went into one of the metropolitan hospitals, where he had blisters and actual cautery to the spine, hypodermic injection of morphia, warm baths, and medicine. After a month of this treatment he left the hospital unrelieved, with severe pain, weakness, and numbness and trembling of the legs. During the next three months he was under the care, first of the divisional surgeon, and then of another practitioner, who used the hypodermic very freely, but with only temporary relief.

When I saw him a few months later, he was pallid and emaciated, complained of pains along the legs, with trembling on standing, some numbness of the feet, and severe lumbar pain with stiffness, which prevented him from standing erect. The pains were incessant night and day. I prescribed for him the following draught, to be taken every four hours. $\text{R Potassii iodidi gr. x}$; $\text{aquæ camphor. \text{ʒ}ss}$; $\text{spir. chloroformi \text{ʒ}ss}$. He had no applications to the back. On seeing him two days afterwards, he told me that for the first time during the last two years he was almost entirely free from pain, and felt himself nearly well, with the exception of weakness. He continued the same medicine at longer intervals, and before the end of a week not a vestige of pain remained. He then took nitrohydrochloric acid with some bitters, and entirely recovered his health and strength. For more than two years he has kept a public-house in Rochester Row, Westminster, and has never had any return of his complaint, except on catching cold, or indulging too freely in drink, when he has always resorted to the same medicine with unfailing relief.

Although his case, as the patient told me, had been considered as an affection of the spinal cord, there can be no doubt that it was one of protracted and deep seated rheumatism, affecting the ligaments of the spinal column, and involving the sheaths of the spinal nerve-roots, complicated perhaps with syphilitic taint, as the early history of the case and the very remarkable success of the treatment might lead us to infer.

HYDROPHOBIA NINE MONTHS AFTER THE BITE OF A DOG.

By AUGUSTUS NEWMAN, M.B., Alrewas, Staffordshire.

J. W., aged 24, a fireman in the employ of the North Western Railway, was going to his work about 5.30 A.M. on June 20th, 1871; when, about a mile from his home, a large dog sprang on him and bit him, inflicting a lacerated wound on the lower part of his cheek, as high as about a third part of the extent of the nose upwards, and extending to the mouth through the upper lip on the right side. The lip was almost torn through. He ran home as soon as he could, and applied to me just before 6 A.M. The wound was freely cauterised, the edges joined by three sutures, and dressed with carbolic acid lotion. It healed well; and in a fortnight he resumed his work, and continued to do so till Sunday, March 17th, 1872, without feeling any inconvenience. That day, he complained that the right side of the face was painful; he thought the cold had struck it while he was riding on the engine. On Monday, he was uncomfortable all day, but managed to do his proper amount of work. He did not sleep through the night; he got up at 6 A.M., but felt too nervous to go to work. He sent for me at 8 A.M. I found him sitting at a table with the remains of breakfast on it. He had eaten part of a boiled egg, and tried some bread and butter, but evidently had only eaten with great effort, and had snapped pieces in a hurried manner. His manner was excited, and almost hysterical; he complained of pain in his nostrils, which prevented his swallowing his tea. His bowels had acted freely that morning, and he had passed urine. His tongue was moist and furred, and protruded with some tremor; his skin was quite natural. I gave him two grains of calomel and a grain of opium in a pill at once, and ordered a mixture containing ammonia, spirit of chloroform, and Batley's solution, every three hours. He vomited the pill, but retained two doses of the mixture; after that, he said he could swallow no more. At 4 P.M., all symptoms were aggravated. He had then a pill containing a grain and a half of opium, which he took in some jam. This was repeated at 9.30 P.M. He was quite sensible then, and reclining on his back in bed.

On March 20th, he was seen at 7 A.M. He had had some sleep during the night, but was afraid of lying back, as he said the pillows were cold. A warming-pan was applied to his pillow, when he laid himself back. He could not take any tea; he swallowed with great difficulty a little spirit (rum) and water. His state was only an ex-

aggeration of that of the previous day. His pulse never rose to 100. His pupils were much dilated. He could not touch fluids: he said he was hungry, but could not even take a thing in his hand to carry to his mouth. His horror at being touched was intense. Mr. Palmer and Dr. Webb of Barton both saw him with me. The simple examination of his pulse was followed by a most fearful convulsion; there was first opisthotonos, then he threw himself forward, and was violently sick. About 2 P.M., he was more delirious, and would walk down stairs, but was induced to go up again without force. No food or drink could be given; the very thought produced tetanic spasms. At 5 P.M., no pulse could be felt at the wrist; his heart was beating feebly; he talked in a rambling way for some hours. At 10 P.M., he asked the clergyman to call on him, but did not seem able to join in any prayers. At 12 P.M., he died quietly.

This case appears a genuine one of hydrophobia. The animal that bit him was said, on good authority, to have bitten another man on the same day, who died with the same symptoms about two months afterwards. I am told that he was a weak, debilitated person. This man (J. W.) was a stout, strongly built young man, peculiarly temperate. Can anything more be done in these cases? Chloroform, and, I suppose, hydrate of chloral, have been suggested. I did think of hypodermic injection of morphia; but I believe to have attempted to give chloroform or to inject morphia, would have been simply impossible without extreme violence.

There was one peculiar feature. The last day, about 10 A.M., the clergyman kindly came to see him, and a little dog followed him into the house and partly up stairs. The patient heard this, and sat up in bed in the most violent alarm.

I can tell little about the aspect of the cicatrix on the lip, for he had a very thick moustache. It certainly had not discharged at all before the attack came on.

CLINICAL MEMORANDA.

EXTRACTION OF ARTIFICIAL TEETH FROM THE CESOPHAGUS.

EARLY on the morning of April 25th, I was aroused by the housemaid, who said she had something in her throat, and that she feared she had swallowed her artificial teeth during her sleep. She was much distressed, and made constant efforts at deglutition. I passed my finger down the throat; but, although I could reach below the cricoid cartilage, there was nothing abnormal to be felt. I then passed a long cesophagus-forcipis, guided by my finger, down the throat, and, about four inches beyond the point where my finger reached, the forcipis struck against a foreign substance, which I seized and gently withdrew. This proved to be a metal plate holding two teeth, and from which projected two ugly-looking hooks for its attachment to the adjoining teeth. The young woman complained of soreness while swallowing for a day or two afterwards, but is now quite well.

ARTHUR BRACEY, Surgeon to the Birmingham Eye Hospital.

A SINGULAR CASE OF POISONING.

A CHILD a fortnight old was ordered dill-water. This, when obtained, was put into a bottle which had previously contained nepenthe. A label was on the bottle with that name. The bottle was empty—whatever nepenthe there had been in it having dried up, and left a deposit of opium on the sides and bottom. The dill-water dissolved the opium; and, upon analysis by Dr. Campbell Brown, was found to contain morphia and meconic acid, in a proportion equal to about two per cent. of opium, a teaspoonful being equal to about twenty-four drops of laudanum. A teaspoonful was given to the infant about 11 P.M.; he died about 4 P.M. the next day. He fell asleep immediately upon the dose being given. His breathing was noticed to change about one hour afterwards. Convulsions and narcotism came on. When he was seen two or three hours after having had the dose, he was not breathing more than about once in a minute. The pupils were not contracted, but insensible to light; the muscles were relaxed; the skin became blue. The treatment consisted of artificial respiration, cold to the head, warmth to the body, enemata (which were returned), and galvanism. The child passed urine. The pulse was small, thready, and feeble. Before death, the pupils were a little larger, and the inspirations became more frequent. The back parts of the lungs were much congested. There had been no action of the bowels.

F. J. BAILEY, L.R.C.P., Liverpool.