THE TREATMENT OF EPILEPSY BY SODIC BROMIDE.

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IN his elaborate paper on the therapeutic employment of the bromides,* Professor Binz finds exception to the statements I had previously made with regard to the value of the sodic bromide in the treatment of nervous diseases. The short paper in which I discussed the uses of this salt,† as far as my experience in it then went, was intended rather as an advertisement (to use the word in its original sense) to the profession, that they should not finally set aside this drug without a further trial, than as a complete and detailed account of its properties. For some time, I have had several opportunities of testing the efficacy of the sodium salt in the treatment of epilepsy, and I think I cannot do better than select some of the cases in which the influence of the drug was, in my opinion, most decidedly marked, and give a short analysis of them.

In making this selection, I have not been influenced by the apparent efficacy of the drug in some cases rather than in others, but by the fact that the epileptic attacks, previously to treatment, occurred at such short intervals, that any amelioration in their number or character was easily observed. With this object in view, I have tabulated the results of eleven cases which have come under my treatment at various periods; and I think I shall satisfy the sceptical that there are some active therapeutic properties in the sodium salt.

Before I briefly describe each case separately, I may as well state that, as regards the females, I carefully excluded pure hysteria from my diagnosis, and for this purpose I mostly relied upon the fact that during the paroxysms the patients bit their tongues or otherwise did themselves severe bodily injury; and these symptoms, in conjunction with the ordinary phenomena of an attack were, I considered, sufficiently diagnostic of epilepsy. As regards the average frequency of the attacks before treatment, I had of course mainly to rely upon the statements of the patients and their friends, and I may here state that I always obtained the confirmatory evidence of two or more persons. I also had in doubtful cases a means of proof which I felt justified occasionally in using. It consisted in omitting the ordinary bromide mixture for a week or more during the treatment, and watching the results. In most cases‡ I found an increased frequency in the number of the fits. I may here casually mention the case of a woman§, who suffered from confirmed epilepsy, and who stated that she had six or seven fits every week. For about two months she had taken thirty grains of potassic bromide in water three times daily; and subsequently, for a month, twenty grains of the sodic bromide in its stead; the fits, however, continued at the rate of two weekly, despite the treatment. Under these circumstances, as it appeared doubtful to what extent the bromides were serviceable, she was placed upon an ounce draught of simple camphor-water three times daily. In the course of the next fortnight, she had twelve fits, which number, in the following two weeks, was reduced to three upon returning to the use of the sodium salt in twenty grain doses as before. With regard to the table itself, the first column to the left hand gives the sex, age, duration of the epileptic period, and the treatment. The treatment itself is divided into periods of one week or its multiple. Occasionally the treatment has been omitted for a time, and notice of such omission will be found in the accompanying statement of the one case in which this occurred. The second column gives the average frequency of the fits before the commencement of the treatment, and is calculated on the data I have above noticed. The third and last column gives the number of fits after treatment, with (when necessary) particular statements of the number after any change of treatment.

CASE I.—A boy, aged 15, of fair complexion and stunted growth, had been the subject of fits since his birth. This patient, as might be supposed, from the long continuance of the epileptic attacks, was not regarded by me as a favourable one for any treatment. His manner was dull and listless, and his intellectual powers were feeble. The frequency of the attacks was not materially diminished in number by the aqueous solution of the salt, although when it was given in com-

bination with an ounce of the decoction of bark the fits seemed to be kept in abeyance, as stated in the table.

CASE II.—A butcher, aged 22, had been subject to epilepsy since an attack of sunstroke in Bombay two years previously. The intellect seemed unimpaired. His general health was good. No fit occurred during the continuance of the treatment with the sodium salt. (See table.)

CASE III.—(To this case I alluded in my previous paper, which was written within seven weeks of the commencement of the treatment by the sodium salt.) The patient, a cigar-box maker, was a fairly nourished young man, aged 25, of dark complexion and feeble intellect, and addicted to drink. His attendance was occasionally very irregular; and to this was probably due the variation in the intervals of time which separated the seizures. The results of the treatment, however, were more favourable than I was led to expect from the circumstances. I was somewhat surprised in this case to find that the potassium salt appeared to exert very slight, if any influence, on the fits. (See table.)

CASE IV.—This patient was a child, two years of age, who had been the subject of epileptiform convulsions since the commencement of dentition. The fits entirely ceased after the commencement of the treatment. The bromides appear to exert a greater influence upon the so-called "convulsions" of children than they do upon the more confirmed epilepsy of adult age. I have rarely found a case of such disease which did not speedily yield to small doses of these salts. In the present instance, the shape of the head, and the conformation of the carpal ends of the bones in the forearm, bespoke a rickety constitution.

CASE V.—This patient, a poorly nourished girl, eighteen years of age, had the closely set eyes and pinched expression of face supposed by some to be diagnostic of an epileptic diathesis. She had been afflicted by weekly epileptic seizures during the past year. She was also troubled with a short cough. Upon examination of her chest, I found the breath-sounds almost cavernous under the left clavicle, with a subsidence of the infracavicular space, and other signs indicative of loss of lung-tissue, and, I have no doubt, of tubercular disease also. I placed a blister under her left collar-bone, and ordered her to take a draught of decoction of bark with twenty grains of the sodic bromide three times daily. She had nevertheless one strong fit during the next week. The dose of the sodium salt was thereupon increased to thirty grains, and from that time she had no further fits (March 14th, 1874).

CASE VI.—A well-nourished man, a blacksmith, aged 18, had occasionally four fits weekly, without premonitory symptoms. For the five weeks he was under treatment, there was no return of the epilepsy. In this case, the disease did not appear to have affected the intellect appreciably.

CASE VII.—This girl had a severe blow on the back of the head four years previously. There was no mark of the alleged injury. The fits commenced about the same period, and were, according to her mother, increasing in severity. She was poorly nourished, of somewhat feeble intellect, and complained of occasional headaches. During the course of her treatment, she was attacked with feverish symptoms and drowsiness. I therefore altered the draught of sodic bromide in decoction of bark to a saline mixture, as stated in the table. As far as the epilepsy was concerned, the treatment was very successful.

CASE VIII.—A servant girl, aged 17, was the subject of epilepsy since Christmas last, and had frequently bitten her tongue in the fits. Her general health was good. The average number of fits before treatment was four or five weekly. The month subsequently was marked by an entire cessation of the fits. The comparatively short time during which this patient had had the disease, and her general health, impressed me with the hopes of obtaining a speedy relief, and possibly a complete cure. The case was still under treatment. (See table.)

CASE IX.—A thin spare man, a hatter by trade, had been the subject of fits for the last eighteen years. The fits came on without warning, and were attended with convulsive motions of the body and limbs on the left side especially. During the course of the treatment, which had extended over a period of six weeks (March 1874), he had had six fits, an average of one weekly, against two or more prior to treatment. Since taking two drachms of the bromide salt daily, he had not had a fit. The result is fairly favourable in this case, when we consider the extended period over which the patient experienced the attacks. (See table.)

CASE X.—A school-boy, aged 13, although only subject to the disease for two years past, had the laterally compressed *facies epileptica* distinctly marked. The fits were at frequent intervals, and, although somewhat mitigated by the treatment, did not entirely cease even under the influence of considerable doses of the salt. No cause could be ascribed for their first appearance. (See table.)

* *Practitioner*, January 1874. Translated by the late Dr. Anstie, from the *Deutsche Klinik*, 1873.

† *Ibid.*, August 1872.

‡ The exceptions to the rule were such cases as had been for several weeks under treatment.

§ This was a patient of my friend, Dr. Legg. The case is not tabulated.

Analysis of Eleven Cases of Epilepsy.

P.B.=Potassic bromide; S.B.=Sodic Bromide.

CASES, ETC.	Average number of fits before treatment.	Number of fits after treatment.
No. 1. Male, aged 15; fits since birth	One or two weekly	One every two weeks, as below
P.B. gr. xv ex aquâ ter d. s.	..	Two in four weeks
S.B. gr. xv vice P.B.	..	Four in three weeks
S.B. gr. xv e decoct. cinch. f. 3j ter die sumend.	..	Two in eight weeks
S.B. gr. xx in haustu	..	One in three weeks
No. 2. Male, aged 22; fits for two years. N.B. Patient began treatment in Sept. 1873, and terminated it on December 1st, 1873. (S.B. gr. xv e dec. cinch. pall. f. 3j ter die s.)	One in two weeks	One in five months. The fit was subsequent to the cessation of treatment
No. 3. Male, aged 25; fits for one year	One or more in the week; occasionally, many in one day	About one in four wks, as below
S.B. gr. ij ex aquâ t. d. s.	..	One in one week
Rep. haustus c S.B. gr. v vice gr. ij	..	One in six weeks
S.B. gr. xx e dec. cinch. p. f. 3j ter die sumend.	..	One in seven weeks
S.B. gr. xxv ut antea	..	None in three weeks
Rep. haustus c P.B. gr. x	..	One in two weeks
Rep. haustus c P.B. gr. xx	..	One in one week
Ditto c P.B. gr. xxv	..	One in one week
Ditto c P.B. gr. xxx	..	One in one week
Ditto c P.B. gr. xl	..	One in one week
S.B. gr. xx (vice P.B.) c dec. cinch. pall. f. 3j ter die s.	..	None in eight weeks
No. 4. Female, aged 2 yrs; fits for 18 months	One or two weekly; sometimes three in one day	None for two months
S.B. gr. ij c dec. cinch. pall. f. 3j ter die sumend.	..	..
No. 5. Female, aged 19; fits for one year	One every week	One in five weeks, as below
S.B. gr. xx e dec. cinch. pall. t. d. s.	..	One strong fit in the wk
Rep. haustus c S.B. gr. xxx	..	None in four weeks
No. 6. Male, aged 18; fits for 5 yrs.	Four in the week, occasionally	None for the five weeks under observation
S.B. gr. xv. ex aq. ter die s.	..	..
No. 7. Female, aged 11; fits for five years	Two or three in the week	One in five weeks, as below
S.B. gr. xv e dec. cinch. pall. f. 3ss ter die sumend.	..	One slight fit in the week
Rep. haustus c S.B. gr. xx	..	None in the week; drowsy
S.B. gr. xv c liq. ammon. acet. f. 3j ex aquâ ter die sum.	..	None in three weeks
No. 8. Female, aged 17; fits since last Christmas	Several weekly; sometimes four or five daily	None for the one month under observation.
S.B. gr. xv ex aquâ ter die sum.	..	..
No. 9. Male, aged 20; fits for 18 yrs.	Two or three weekly	Six in 6 weeks, as below
S.B. gr. xv e dec. cinch. pall. f. 3j ter die sum.	..	One in the week
Rep. haustus c S.B. gr. xx	..	Two in one week
Ditto c S.B. gr. xxx	..	Three in one week
Ditto c S.B. gr. xl	..	No fits for two weeks
tinct. cannabis Ind. m. xv.	..	..
No. 10. Male, aged 13; fits for 2 yrs.	About three weekly	Five in five weeks, as below
S.B. gr. xv e dec. cinch. p. f. 3j ter die sum.	..	One in three weeks
Rep. haustus c S.B. gr. xx	..	Three in one week
Ditto c S.B. gr. xxv	..	One in one week; feels better
No. 11. Male, aged 25; fits for 11 yrs	About one every two weeks	One since commencement of treatment 5 weeks previously
S.B. gr. xx c sodæ bicarb. gr. xx et acidi tart. gr. xviii in aquæ f. 3j ter die sumend.	..	..

CASE XI.—An ex-police constable, aged 25, had been subject to fits about once a fortnight for the last eleven years. This patient was jaundiced when he first came under treatment. There was a premonitory impediment of the speech before a fit. His general health was good. Considerable relief was experienced by the administration of sodium salt in this case, although the man's history somewhat precluded the hopes of permanent benefit.

THE TREATMENT OF BOILS AND CARBUNCLES.*

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THE object of the present paper is once again to call attention to the subject of boils and carbuncles and their treatment. This I have already done in 1869 and 1874; but, as I have reason to believe that the treatment which I advocate is by no means generally adopted, and as every fresh case of the disease confirms me more and more in my conviction of its efficacy, I have thought it worthy of being again mentioned at such a gathering as this.

I think the usual treatment of boils and carbuncles, as set forth in works of medicine and surgery, may be briefly described as this. If seen within the first day or two of its appearance, we are told either to divide the pimple across, or to apply nitrate of silver to its apex; after this, we are told to poultice it, to apply cold compresses, or merely to use pressure; and, when the mass has grown large and tense, either to let it run its natural course, or to divide some portion, or the whole, of it by incisions, or by caustic, and again to poultice, and so on.

In 1866, the late Mr. Startin wrote in the columns of the JOURNAL of this Association that he regarded "boils and carbuncles as having frequently or constantly a parasitic origin"—this opinion being grounded upon the success of his special practice, upon the fact of his having once or twice found cryptogamic vegetation in them like that of sycosis, and upon the observed fact that boils are occasionally propagated to other parts of an affected person, or even to other individuals by very close contact. But he said: "My opinion of the parasitic nature of these complaints is chiefly influenced by the rapidly curative effect of the application of parasitocides to the apex of the boil or carbuncle." These parasitocides were various forms of caustic, such as iodine, nitrate of silver, caustic potash, chloride of zinc, blistering liquids, and mineral acids, but the one which, for various reasons, he preferred to all others was the acid nitrate of mercury.

In my own practice, I have found these views of the parasitic nature of those diseases, as shown by the efficiency of destructive caustics, to be fully confirmed; but I believe that I have greatly improved upon Mr. Startin's practice, and that I have discovered that in carbolic acid we have an agent which is not only more safe, more manageable, and more universally applicable, but one which seems to be specifically destructive to the life and progress of both boils and carbuncles.

Boils are not uncommon, but carbuncles only occur in one's practice occasionally; but I may say that, in the several examples of carbuncle which have occurred to me recently, and in all the cases of boil, the carbolic acid has never failed—when properly and sufficiently applied—to arrest their growth and to abort them at once, if in an early stage; and to check their spread and prevent further extension in a later stage.

I believe it to be general experience that the pimple in which a boil begins its life and career may be destroyed by any common caustic, if thoroughly applied. I venture to assert also that a carbuncle, even when very considerably advanced and of very considerable size, may in like manner be destroyed by the free application of carbolic acid to its centre and other parts.

The essentials for its proper action, so far as my experience has gone, appear to be these.

1. The acid must be applied in *strong* solution (four or five parts of acid to one of glycerine is the strength I employ).

2. It must be brought into contact with the diseased tissue, for it appears to exert no influence on or through the unbroken skin. To this end, if sufficient opening do not exist when the case is first seen, a proper one must be fearlessly made in the very centre of the disease by some appropriate caustic, and, perhaps, the acid nitrate of mercury effects this better and with less discomfort than any other.

3. The acid solution must be occasionally reapplied to, and into, the hole thus formed, or those already existing, and I have found it a good plan to keep a piece of lint wet with a weaker solution constantly over the sore.

Take the following example which has occurred to me within the last two or three weeks.

A lady, aged 40, showed me a boil on the left buttock, of six days' duration. It was circular with a diameter of four inches; was red and angry looking; tender, hard at its base, and rapidly increasing. To

* Read at the combined meeting of the Cambridge and Huntingdon, East Anglian, and South Midland Branches, at Cambridge.