now laid down by Dr. Barnes), and, as will be seen, with the fortunate result of recovery of the patient.

On August 26th, 1873, at 11 a.m., a strong, healthy Mahomedan, aged 25, was brought to me, said to be suffering from the effects of a dose of medicine which he had taken about 8 a.m. for fever, supposing it to be quinine. Soon after taking it he began to feel a severe burning pain in his stomach, and this gradually increasing, he begged his friends to bring him over to me. On his arrival his friends showed me the bottle from which he had taken the supposed quinine, and in it I found about a drachm of strychnine tolerably pure, only a little discoloured. Of this he stated that he had poured into his hand and taken, without weighing, a quantity which he thought to be a proper dose of quinine. He was complaining of a severe burning pain in the epigastrium, and spasms of the muscles of the back and legs had set in, opisthotonos being well marked. Having no sulphate of zinc at hand just then, I gave him half a drachm of ipecacuanha powder, followed by copious draughts of warm water; these he took pretty readily, but with some effort; in about ten minutes vomiting occurred, but not freely, so I repeated the dose of ipecacuanha, after which vomiting was very free, the contents of the stomach being ejected with great force. After this, the tetanic spasms continuing to increase, at 3 p.m. I commenced the inhalation of chloroform, which soon relieved the spasms and put him into a good sleep for about an hour; on awaking, the spasms returned, and chloroform was again administered with the same good effects. At 7 p.m. the spasms had much decreased in frequency and force. Chloroform inhalation was continued at intervals, as required, till about midnight, by which time the spasms had nearly ceased, and by morning completely so, his only complaint then being of pain and soreness in the muscles of the back. The man was perfectly conscious throughout, and after the emetics had freely acted, he showed me how much of the drug he had taken, which, on being weighed, was fully two grains. He stated that he had taken no food that morning, either before or after taking the medicine, and this was confirmed by the character of the vomit, which was quite free of any food. This, of course, made me less hopeful of his recovery. The way the man accounted for the possession of the drug was, that one day, about a month previously, he had picked up on the road a paper containing it, and, on showing it to some friends and being told it was quinine, he had put it carefully away in a bottle for future use, and having, the night before taking the dose, had an attack of fever, he thought he would make use of it, and did so with the consequences above described.

PELIOSIS RHEUMATICA.

By J. McNAUGHT, M.D., M.R.C.S., Newchurch-in-Rossendale.

The two following cases, extracted from my note-book, may be of interest, if read in connection with those brought before the Harveian Society by Dr. Stephen Mackenzie, and reported in the JOURNAL of March 18th.

On April 10th, 1881, I saw a female child, aged six years, whose mother stated that for the last fortnight small red spots had come over the legs and thighs, and gradually died away in two or three days, to be succeeded by fresh crops. The child had complained of pain and stiffness in the legs, and had been feverish and out of sorts. I found her in bed, unable to walk, complaining of stiffness in the legs and pain in the knee-joints, which were slightly swollen. The skin was hot, the tongue foul, and the bowels constipated. Scattered over the legs, thighs, and buttocks, were numerous purple spots, varying in size from a pin's-head to a sixpence. They were unaltered by pressure. The gums were normal, and there were no spots higher than the hips. These discolourations gradually faded away, passing through the varying tints usual to a bruise in about four days. They were succeeded by a fresh eruption of spots of a brighter red colour, rather more raised and unaffected by pressure, and they were now freely scattered over the arms as well as the legs. There was considerable fever and loss of appetite. She was pale and anæmic, and at the apex of the heart a systolic murmur was heard. On the 25th she was better, the spots having faded to a dirty green colour. In a day or two a fresh eruption occurred, and there was a return of the feverishness and of the pain in the joints. The case pursued a similar course for some weeks, the spots fading in about four days, to be succeeded by a fresh crop, which came out usually during the night. There was once or twice slight epistaxis. The treatment at first consisted of liquid extract of ergot, wine, and nutritious food; but as this seemed to do little good, she was put on iron, and then quinine; but seemingly with little benefit, for the disease appeared to gradually disappear independently of treatment at the end of three months. This case corresponds closely to the

description given by Dr. Mackenzie of peliosis rheumatica. I was struck by its peculiar features at the time, and noted it accordingly.

The second case presents very different features. In March 1881, I saw a male child, aged 18 months, which had recently been suffering from teething, irritation, and bronchitis, and was left in a weak condition. The mother said she saw nothing peculiar about it when put to bed at night, but in the morning noticed the pillow much stained with blood, evidently from the nose and the face, as it was when I saw it. One side of the face and eyelid were found of a deep black colour and enormously swollen, as if from a very severe bruise. The other eyelid was discoloured, but to a less extent. On the tip of the tongue were three punctiform ecchymoses, and scattered over the scalp and lower extremities were a few others, not by any means numerous nor of large size. They were unaffected by pressure. The gums were slightly but decidedly spongy below the front teeth. The child was feverish and extremely restless. The treatment was liquid extract of ergot, and for a day or two some improvement took place. Free epistaxis occurred on the third day, and on the fourth night death took place suddenly, probably from extravasation into the lungs, so far as I could gather from the statements of the parents. This is an undoubted case of purpura hæmorrhagica, and presents a marked contrast to the first one. The points of special interest are the early age of the patient, the spongy state of the gums, usually said to be absent in purpura, and thus distinguishing it from scurvy, and the sudden death.

CLINICAL MEMORANDA.

ON THE PRESENCE OF OIL-GLOBULES IN THE URINE.

THE presence of free oil in the urine is a sufficiently rare occurrence, I believe, to deserve a brief record. On referring to Dr. Bristowe's *Treatise on Medicine*, I find that "the presence of fluid fat in the form of globules is said to have 'occasionally been observed,' so that it, as a symptom, is by no means common.

I am at present attending a young man, aged 19, the subject of advanced phthisis, who is taking small doses of cod-liver oil twice a day, and his mother about a week ago remarked that she did not think the oil was doing her son any good, as he was daily passing it just as he took it, meaning that the oil was to be seen unchanged floating on the surface of the urine. I was naturally struck with his account of such an unusual symptom, and at first thought that the oil, if it were oil, had gained access to the urine from without in some way or another. I, therefore, directed her to wash the vessel carefully with soap and water, and then to dry it with a clean cloth before her son micturated again, and then to send me some in a clean bottle for microscopical examination. This the mother has done twice, and the result in each case has been the same. I may say that I personally superintended the procuring of the urine on the second occasion. With the naked eye oil-globules were distinctly to be seen floating on the surface, and, on placing a drop under the microscope, the characteristic appearance of the globules could be readily observed. The nitric acid test showed no albumen.

This last day or two the patient has been unable to continue taking his oil, and, as a result, the unusual symptom has disappeared.

O. BOWEN, M.R.C.S.ENG., ETC.

Liverpool, April 8, 1882.

GALL-STONES IN AN INFANT THREE MONTHS OLD.

AT what period of life the formation of gall-stones may be expected is not accurately stated by medical writers, but I think it is tacitly understood that they are surely to be found before puberty.

The following case will be interesting as demonstrating that, at a very early age, gall-stones may be formed and voided, and instructive as an aid in diagnosing the causes of persistent crying in infants, which cannot readily be accounted for by the usual diseases common to childhood.

Recently, I saw a male child, aged three months, who had been entirely brought up at the breast, and who, with the exception of an icteric turn during the first month of its existence, had been very healthy. At six o'clock in the evening, after having been nursed, it commenced to cry, and continued almost uninterruptedly to do so for six hours, when a sedative mixture was administered, which procured disturbed sleep for the little sufferer during the remainder of the night. In the early morning a dose of castor-oil was given, which soon produced an evacuation. On examination of the diaper that was removed, the motion appeared healthy, but the eye was arrested by three small