serious result. Now, if any explanation so simple as that given by Mr. Richardson, should prove, after further research, to account for some of these occurrences, a great step in the practice of medicine will certainly have been made. I shall look forward for further investigations on this subject with exceeding interest.

Dobcross, Paddleworth, near Manchester,
August, 1852.

ANOMALOUS CASE OF SCROFULOUS ABSCESS OF THE HEART.

By ROBERT RANKING, Esq., HASTINGS.

JAMES ASHENDEN, aged 39 years, of remarkably temperate and industrious habits, by occupation a gardener, after having complained of slight indisposition for ten days, which he attributed to having taken cold, and for which he had no medical assistance, was suddenly attacked on the morning of April 28th, 1831, at about eight o'clock, with the following symptoms:—viz., dyspnoea and most acute pain in the chest, referred especially to the region of the heart. The countenance exceedingly anxious and ghastly, having the appearance of a person suffering from extreme hæmorrhage, cheeks and lips perfectly blanched; extremities and the whole surface of the body cold and imbrued with profuse clammy sweat; eyes sunken; incapacity to lie down; pulse scarcely perceptible, about 70 beats in the minute. On inquiring into the circumstances of the attack, I learned that, feeling himself indisposed, he had, on the previous evening, taken a dose of Epsom salts, which had acted twice that morning; that he was in the act of stooping to pull some radishes, when he felt a degree of faintness come over him, attended with so much oppression at the chest, that he with great difficulty got home and threw himself upon his bed. I was sent for in great haste, his friends supposing that he was dying. My assistant who first saw him, directed sinapisms to be applied to the chest and feet, and ordered him a mixture with ether, ammonia, and mistura camphoræ, a dose to be taken every quarter of an hour.

Ten o'clock, A.M.—No improvement; state of collapse extreme.—Ordered to take hot brandy-and-water alternately with the mixture, and large flannels wrung out of very hot water to be applied to the arms, legs, and thighs.

Twelve o'clock.—Some degree of reaction; hands and body warmer; feet and legs still cold; pulse 108, exceedingly irregular; great oppression and disinclination to speak; complains of feeling sick.

Four P.M.—Called to him in great haste. Frequent vomiting; great prostration, amounting almost to syncope, after each fit of vomiting; pulse at the wrist of the same feeble character, and not synchronous with the pulsations of the heart.—To have carbonate of ammonia with lemon-juice, in a state of effervescence, every two hours.

Ten, P.M.—Much the same. Continue as before.

April 29th.—6 A.M.—Has passed a wretched night; vomiting incessantly; pain removed from the heart, but very acute over the right lobe of the liver. So much so that he declares the least pressure would be instant death.—To have a large blister applied over the pained part, and to take Hydrarg. Subm., gr. iij.; Pulv. Opii, gr. ss. quarta quaque horâ.

12 o'clock.—Sickness somewhat abated; oppression of chest much relieved; can now take a deep inspiration; pulse the same; extremities still cold.

Four, P.M.—Sickness returned with great violence; bowels have not acted. To have a purgative enema, and continue the calomel and opium.

Ten, P.M.—Sickness very urgent; pulse much more feeble and intermitting; pain returned with great violence; countenance extremely anxious and cadaverous. Has all along expressed a conviction that he is a dying man.—To continue the calomel and opium, and to have arrowroot and brandy by teaspoonfuls, every ten minutes.

30th.—7 A.M.—Has slept at intervals during the night; says he has little or no pain anywhere; sickness still very urgent; exhaustion excessive; pulse scarcely perceptible, and so irregular as to be with difficulty counted; blistered surface covered with gangrenous patches, the size of half-a-crown.—To have Quin. Sulph., gr. iij.; Extr. Humuli., gr. iij., in a pill, every two hours.

Twelve, A.M.—Just before taking the first pill, he got the yolk of an egg beat up with wine, which remained on the stomach; has since taken four pills, and several articles of food, which have not been rejected; pulse not improved.—To take whatever he can fancy, provided it contains much nourishment in a small compass; and to have Quin. Sulph., gr. iv., secundâ quaque horâ.

Four, P.M.—Sickness much abated; pulse more regular and distinct; has retained his food.

Nine, P.M.—He is very much more comfortable; has no sickness, but complains that everything he takes is like pepper in his stomach.

May 1st.—7 A.M.—Much the same; an indifferent night; bowels constipated.—To have Hydrarg. Subm., gr. ij.; Ext. Coloc., gr. vj., in pil. ij., tertiâ quaque horâ donec alvus sit solut.

Two, P.M.—Bowels have not acted; abdomen painful and distended.—The enema to be repeated.

Ten, P.M.—No evacuation; no sickness; great pain and distension of abdomen to be prevented, and to take Ol. Croton, gtt. j., statim, and continue the quinine.

2nd.—7 A.M.—Has had two small evacuations from the bowels; complains of great oppression at the præcordia; pulse extremely weak; constant vomiting.

Ten, A.M.—Vomiting has again ceased, in other respects he is the same.—To continue the quinine and nourishment.

Four, P.M.—He is sinking. He continued to sink from this time, and died between one and two o'clock in the morning of May 3rd.

Sectio-cadaveris fourteen hours after death.—The

blood in the cuticular veins was fluid; the thoracic and abdominal viscera warm. *Thorax*: The pericardium was much thickened, and distended with a turbid yellowish fluid, in which were floating numerous shreds of coagulable lymph; the membrane was so firmly adherent to the heart at one part, that it could not be separated. The heart exhibited marks of excessive inflammation, being covered with flakes of coagulable lymph over its whole external surface, and upon examining the part where the pericardium was adherent, there was an abscess imbedded in its muscular structure, containing nearly two ounces of scrofulous matter; the right auricle and ventricle bore marks of inflammation internally, the vessels of the valves and lining membranes being highly injected. The liver, spleen, pancreas, and kidneys were in the same state of repletion. The gall-bladder was distended with bile, and its duct impervious. The mucous lining of the stomach and alimentary canal was in a state of inflammation throughout its whole extent.

Observations.—In reflecting on this case, and the morbid appearances discovered after death, I have sometimes been led almost to question how far I had done everything for the poor fellow that might have been done, or that the nature of the case required; whether blood-letting, either generally or locally, might have been adopted, with any prospect of relief, or with safety. This point was not overlooked at the time; but taking into consideration the extreme state of collapse with which the attack was ushered in, and which continued to its termination—a state very much resembling what we have since seen in the collapse of malignant cholera, I felt that any abstraction of blood would have increased the already frightful state of exhaustion, and hastened the fatal crisis. The sunken eye; the blanched, ghastly countenance; the indistinct, fluttering, irregular pulse; the cold clammy state of the whole surface of the body; and the fact, that the blistered part ran so rapidly into a gangrenous state, all evidenced so strongly the extremely depressed state of the vital powers, that there appeared to me no other hope of arresting the progress of the disease, but by getting the system under the influence of mercury as speedily as possible, and at the same time, supporting the vital powers by nutritious food, quinine, and diffusible stimuli.

Proceedings of Societies.

BATH AND BRISTOL BRANCH.

A SPECIAL general meeting of the BATH AND BRISTOL BRANCH of the PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION, was held on Wednesday evening, November 24th, 1852, at the Royal Western Hotel, Bristol, for the purpose of receiving the report of the Council on the case *Bourn v. Cox*; and also for considering Dr. Swayne's motion in reference to a letter

published by Mr. John Barrett in a public newspaper, in relation to the same case.

Mr. NORMAN, of Bath, presided on the occasion. And there were also present from the Bath district—Drs. Davies and Tunstall; Messrs. Bagshawe, J. Barrett, Bartrum, Brace, Bush, Church, Crang, Flower, George, Ormond, and Soden. From the Bristol district—Drs. Budd, Davey, O'Brien, Swayne, and Symonds; Messrs. Burroughs, Bryant, Coe, Colthurst, Collins, Estlin, Godfrey, Green, Hinton, Lancaster, Leonard, Lucas, Macey, Mayor, Morgan, Prichard, Sawyer, Sleeman, Smerdon, and H. Swayne.

Mr. COLTHURST, Honorary Secretary of the Bristol Branch, read the notice convening the meeting, and the minutes of the last meeting.

Mr. E. L. BAGSHAWE, (Bath): Sir, I rise to ask,—As the whole matter was referred to the Council, what was the reason that some of the speeches at the last meeting were left out, and others abbreviated? Mr. Cox, Sir, has resigned, now he finds it convenient to do so. I was not aware that I was a member of the Association on the last occasion, having subscribed only the day before, but I came with Mr. Field, as one of the medical witnesses examined at the trial. I ask this question, and I am prepared to make other statements respecting this case.

Mr. WILLIAM BUSH, (Bath): I wish to ask one or two questions.

THE PRESIDENT: We must dispose of Mr. Bagshawe's first.

Mr. BUSH: I think, Sir, the meeting will see the propriety of allowing me to ask one or two questions before Mr. Bagshawe is answered.

Mr. COLTHURST: Before answering Mr. Bagshawe, or hearing Mr. Bush, I beg, Sir, to append to the minutes of the last meeting which have been read, "that the question respecting Mr. John Barrett's letter, in reference to the case of *Bourn v. Cox*, published in a public newspaper, was adjourned till the next meeting." I omitted to read this by inadvertence just now.

Mr. BUSH: I do not think that Mr. Bagshawe will object to my questions being put first. The first I have to ask is, whether the Secretaries are provided with a professed reporter of this meeting.

Mr. COLTHURST: I beg to say that the sworn and accredited reporter of the Bankruptcy Court of this district is present for the purpose of taking the proceedings, and having provided the most acknowledged, and, I believe, the only publicly-recognised reporter of the district, I conceive I have discharged myself of any responsibility which may be considered to rest on the Branch or on the Secretaries.

Mr. BUSH: I wish to ask another question. I am sorry to make any allusion to the last meeting, but I think it necessary to inquire, whether the Secretaries have requested the reporter to take a verbatim report of all that takes place on the present occasion?

Mr. COLTHURST: Yes; he is instructed to take notes of all that occurs at the present meeting.

Mr. BUSH: I have to ask one more question. Is it the intention of the Secretaries that the report so made