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HOSPITAL REPORTS.

Worcester Infirmary.

CASES OF CHOREA SUCCESSFULLY TREATED BY LEECHES AND THE APPLICATION OF COLD.

Under the care of JONAS MALDEN, M.D., Physician to the Infirmary.

[Reported by Erlin Clarke, M.B., House-Surgeon.]

THE following cases of chorea are interesting, chiefly on account of the marked success of a plan of treatment not very frequently adopted, and indeed opposed to the views of many eminent authorities. In general, chorea is a disease yielding to treatment with sufficient ease; but examples occur now and then requiring great assiduity and patience, and so intractable on the usual plan as seriously to endanger life; indeed, more than one case is on record where the powers of life have been exhausted by the uncontrollable muscular efforts.

CASE I. Emma Bladder, aged 12, a fresh coloured healthy looking child, was admitted an in-patient, under the care of Dr. Malden, Feb. 10th, 1855. Her mother states that, about three weeks ago, the girl had been frightened by some militiamen, and that in a few days she observed twitchings of the arm. The peculiar motions of chorea gradually extended, and increased in severity, till, on her admission, every limb was in constant motion, and the features were much distorted by the irregular and spasmodic action of the muscles. Her appetite is good, but she has some difficulty in swallowing food. Pulse and respiration normal.

Sumat pulv. jalapæ co. gr. xv statim.
Mist. ferri co. ʒi itis horis.

Feb. 11th. Bowels freely moved; spasmodic movements more severe.

Sumat zinci sulph. gr. ij; ext. hyos. gr. iij ter die.
Rep. mist. ferri co.

Feb. 12th. She cannot now be kept in bed, unless constantly held or tied down; the movements are so violent. She had no sleep last night. Bowels acting freely.

Feb. 13th. She appears now to be suffering from the constant irritation. Tongue dry and brown. She can take but little nourishment; spasmodic movements still more severe; gets no sleep. Ordered wine and beef-tea.

Feb. 14th. The nates and hips are excoriated from the incessant friction. She passes urine under her, and is rapidly emaciating. She is constantly held in bed, where she tosses about and moans, but says she is in no pain. Twenty minims of Battley's sedative failed to procure sleep last night; and, seeing the urgent necessity for procuring some cessation of the involuntary motions, I administered chloroform after repeating the opiate to-night. This was followed by about half an hour's repose.

Feb. 15th. She is now suffering greatly from four days' and nights' loss of sleep, and the consequent exhaustion. The sedative and tonic plan of treatment having had a fair trial without success, Dr. Malden carefully examined the spine, and in the lower dorsal region discovered a small spot, where percussion gave some pain, and immediately produced increase of the spasmodic action. Here six leeches were applied, followed by bladders of snow (which was lying on the ground at the time). There was at first great difficulty in the application, as it was necessary

forcibly to restrain her movements; but in less than half an hour comparative quiet was produced, followed by more than four hours' tranquil sleep.

Feb. 16th. Convulsive motions less violent; tongue moister, but still brown. She expresses herself relieved; but as there was still some tenderness over the spine, the leeches and snow were repeated: and from this time she steadily improved, and in a few days was put upon the use of iron and the shower-bath, regained flesh and strength, and was discharged cured by the end of the month.

CASE II. Hannah Holloway, aged 12, admitted June 9th, 1855, also under Dr. Malden, with chorea of three weeks' standing. The disease arose without apparent cause, and, though gradually increasing in severity from the first, is not at present worse than the general run of cases. There is no spinal tenderness, nor abnormal cardiac action; and the bowels act regularly. She was at first put upon the usual plan of brisk purgatives, combined with ferruginous tonics and the cold shower-bath; but by the end of the week the convulsive movements were much aggravated, articulation and deglutition were greatly impaired, and it was impossible to keep her in bed. She was placed on mattresses on the floor, where she lay tossing about for four days without sleep, rapidly emaciating, and the countenance marking the great exhaustion of the vital powers. Tongue parched and brown; pulse rapid and weak. Full opiates had failed to produce sleep; and, though the spine was repeatedly examined, no such evidence of tenderness could be found as was so well marked in the last case. On the 19th, however, a spot in the lumbar region of the spine appeared to be slightly more sensitive to percussion than others; and six leeches were applied, followed by ice in bladders. The relief was again most marked; four or five hours' tranquil sleep followed; and the improvement evidently dated from this point. The emaciation was very great, and the strength seemed to have been more diminished than in the former case. The excoriation of the elbows, ankles, and hips, was very severe. She was ordered wine, with beef-tea and eggs; and five minim-doses of Battley's sedative liquor every four hours. She became more tranquil, and the amendment was steady. On the 20th, she was able to use a cold douche to the spine, though she was obliged to be supported while using it, as she was unable to stand alone, from debility. There are no remains of dorsal tenderness. Appetite good; tongue clean and moist; and bowels regular. The carbonate of iron completed the cure early in July.

REMARKS. In both these cases, the tonic plan of treatment failed to arrest the progress of the disease; and in both also the local tenderness of the spine indicated corresponding local depletion, which was followed by sleep and consequent cessation of the previously uncontrollable movements; thus affording time for the repair of tissue whose waste was previously going on so rapidly that the cases were assuming a very serious aspect.

Worcester, October 22nd, 1855.

Royal Free Hospital.

CASE OF ULCER OF THE STOMACH.

By WILLIAM BRINTON, M.D., Physician to the Royal Free Hospital.

FROM a large number of cases of ulcer of the stomach which have lately come under my care in the Royal Free Hospital, I have selected the following instance, as afford-