at all events, immediate upon that portion of the nervous system which we know to be engaged in the manifestation of tetanic symptoms—namely, the spinal marrow. I am aware that this opinion is at variance with that of some French physiologists, Longet among the number, who maintains that æther does induce insensibility of the spinal marrow as well as of the cerebral lobes, though only secondarily to the latter, and when carried to a degree in itself all but fatal; but I still consider, that *therapeutically* considered, æther cannot be employed in diseases of spinal origin, as granting that it is possible to influence that part of the nervous system, it can only be done at the risk of seriously prostrating the functions of the cerebral portion.

If the spinal marrow either cannot be affected at all by æthereal inhalation, or only as secondarily to the production of deeper cerebral insensibility, than most people would consider themselves justified in inducing, it must be obvious, on reflection, that it is not likely to act beneficially in tetanus, for we know that the functions of the true spinal marrow gain an increased intensity by the abolition of the controlling power of the brain. Such being the case, we might expect that the spasms of tetanus, so far from being mitigated, would be aggravated by the inhalation. This was not actually the case in the instance which I am about to record, for the plain reason that inhalation could not be carried on to the point of inducing insensibility. The mere attempt to insert the pipe into the mouth caused the spasms to reappear; and the first contact of the æther vapour with the bronchial membrane induced such fearful convulsions, that to proceed with it was out of the question. In recording this case, however, I would not omit to state, that the inhalation was attempted with a common bladder and pipe; as the more effective instruments which ingenuity has devised in such abundance, had none of them at the time been brought into existence. The case is briefly as follows:—

A man aged about 60, of intemperate habits, but of remarkably fine and athletic proportions, ran a nail through his boot into the sole of his foot, near the ball of the great toe, while walking across some old timber. The accident gave him no uneasiness until the expiration of a week, when he complained of stiffness in the neck, and placed himself under the care of Mr. Coe, a surgeon of Bury St. Edmunds. The next day the tetanic symptoms were general, and my co-operation in the treatment of the case was requested. On visiting the patient, about eleven in the morning, I found the jaw completely locked, the spasms frightfully violent, and considerable opisthotonos; in fact, every symptom was present of tetanus of the most acute character. Our treatment was commenced with the *Cannabis Indica*, full doses of which were with difficulty got down; but this medicine was for a period omitted in favour of the æther-inhalation, which we determined to essay. A common bladder and pipe

being furnished, and two ounces of the purest æther we could obtain being put into it, the patient was got into a bath at 108°, and the inhalation commenced. The warm water had partially relaxed the board-like rigidity of the body, and the poor fellow expressed some relief, when the attempt to insert the pipe again excited a strong spasm. Being however, anxious to persevere, he contrived to push it into his mouth, but the first breath he drew aggravated the spasm in a ten-fold degree, the body became perfectly opisthotonic, foam issued from the mouth, and the man altogether presented so frightful a spectacle that we might fairly have been excused had we desisted from that moment. We, however, after allowing the effects to subside, made one more attempt, when the recurrence of the same symptoms convinced us of the worse than uselessness of the proceeding.

The subsequent treatment need scarcely be alluded to, as my object is solely to point out the failure of the æther, but I may state that he was bled largely and continued the cannabis, with some amendment, and in the evening had a tobacco enema, (half a drachm to half a pint of water,) which acted effectually in relaxing the spasms. A warm perspiration ensued, the patient was enabled to open his mouth to the extent of an inch, and expressed himself as in every respect better. He remained quiet for nearly an hour, with a good pulse, when a sudden spasm seized him, in which he died.

OBSTINATE CASE OF CONSTIPATION.

By JOHN ELLIOTT WOOD, Esq., Surgeon, Rochdale.

Nancy Sladen, a married woman, the mother of several children, was seized on February 19th, 1847, with pain in the abdomen, vomiting, hiccough, and other symptoms of strangulated hernia. She had been the subject of irreducible femoral hernia for several years. The hernial tumour, however, though large, was not larger than usual, nor more tender to the touch than the abdomen generally. Pills of calomel with croton oil were administered, and injections used, without producing any discharge from the bowels. The symptoms gradually increased in urgency, and on February 21st the usual operation for femoral hernia was practised, the patient being at the time under the influence of æther. The bowel and omentum were found in a natural state, no strangulation existing.

Large doses of calomel were now administered by the mouth, and injections of castor and croton oils diligently persevered in, without any relief to the symptoms. The abdominal tenderness increased; the hiccough and vomiting continued; there was a remarkable anxiety of countenance.

On February 22nd, a solution of morphia was prescribed, which afforded the patient more relief than anything hitherto had recourse to.

From this time to March 31st, a period of *more than five weeks*, croton oil, castor oil, compound extract of colocynth, large doses of calomel, jalap, injections of croton and castor oils, of turpentine, of tobacco infusion, of large quantities of warm water, friction to the abdomen with castor oil, with turpentine, the cold

douche, every remedy, in short, calculated to produce a purgative effect, was tried without effect. The morphia was continued during the whole time with great benefit. Beef tea, jellies, wine, and eggs, were ordered, and taken with appetite.

On March 31st she felt an inclination to go to stool, and parted with a motion, perfectly natural in consistence and colour; this was followed by several others in the course of the day, till she had discharged a very large quantity of fæcal matter. There was no blood, or mucus, or scybæ, and no portion of intestine voided.

The incision over the hernial tumour, it should be stated, healed in a week. The night before the re-establishment of the action of the bowels, the hernia became large and painful, but was reduced to its usual size by pressure without difficulty.

The patient is now (April 3rd,) in a fair way for recovery, though reduced in strength and flesh.

Rochdale, Lancashire.

Hospital Reports.

HÔPITAL DE LA PITIE, PARIS.

A CASE OF ENGORGEMENT OF THE HEART AND INTERNAL ORGANS, PRODUCED BY A SEVERE KICK UPON THE EPIGASTRIUM, AND FOLLOWED BY SYMPTOMS OF INTERMITTENT FEVER, AND PERIODIC NEURALGIA, WITH REMARKS.

(Communicated by SEPTIMUS LOWE, Esq., M.R.C.S.)

History of the case: present attack; symptoms on admission.—Treatment: its effects; progress of the case; convalescence; cure.—Remarks: importance of percussion; nature of the attack; engorgement of the heart, lungs, and liver.—Cause: "anervismie;" benefit derived from bleeding.—After symptoms: "hypernervismie;" intermittent fever; intercostal neuralgia; periodicity referred to the gangliothic system and spleen.

S. P., a female aged 18, admitted into the Hôpital de la Pitié, under Professor Piorry, March 19, 1847. She is a needle-woman, of the ordinary stature, sanguine temperament, and florid complexion. She is a native of Paris, and has resided all her life in the Rue Mouffetard, inhabiting a small ill-ventilated apartment, and sleeping in the same room with eight other persons. She has never suffered from rheumatism or hysteria. About three months since she had a severe cold, with pain in the epigastrium, and loss of appetite, but she was not put under any treatment. Her health has been generally very good. About six o'clock on the evening of the 18th of March, whilst restraining a patient during an attack of hysteria, she received a severe kick in the epigastric region; she suffered but little at the moment, and continued her usual occupations. About one o'clock in the morning of the 19th, she was suddenly seized with violent pain below the left breast, shooting through to the inferior posterior part of the chest on the same side, with very great difficulty in breathing, and considerable anxiety and restlessness; she had no shivering fit nor other

premonitory symptom; she did not receive any treatment, and was brought to the hospital at six o'clock the same morning. At present the patient lies upon her back, rolls her head from side to side, throws her arms about, and moans as if in great pain; the skin is moist and natural; the expression of the countenance is anxious, the lips and cheeks are florid; the respiration is hurried and laboured, fifty-five in the minute; she speaks interruptedly, catching her breath between each word. There is no cough, the physical signs of the lungs are quite natural. She complains of severe pain, (which has continued since one o'clock this morning,) shooting through from the xyphoid cartilage to the spine. She states that she feels a tightness about the chest, and a sensation as if she were being suffocated. There are no external marks of injury in the epigastric region. On auscultation, the heart's beat is found to be slower than natural, there is a slight degree of harshness with the first sound, and the sounds are heard over a larger surface than usual. On percussion, the heart is found to be enormously enlarged, measuring from above downwards four inches and a half, and from base to apex five inches and a half; the dulness is very strongly marked; the aorta is also distended; the pulse is laboured and compressible, seventy in the minute. There is no nausea nor vomiting; the large intestines are filled with solid matter, and the stomach is distended with gas; the bowels have not been moved for the last eight days; the liver is somewhat enlarged; the spleen is of the usual size; the urine is natural in quantity and quality; the catamenia are regular.

The extent of the heart being marked out upon the skin with nitrate of silver, Professor Piorry ordered the patient to be bled to the amount of thirty-two ounces; during the bleeding she experienced great relief, and at the conclusion she expressed herself nearly free from pain; the dyspnoea was almost entirely removed, but there still remained some degree of tenderness in the epigastrium. On again percussing the heart, it was found to have diminished to the extent of an inch from above downwards, and three quarters of an inch on its left border; the dulness was much less intense in its character; the aorta was considerably lessened, and the liver was also diminished about half an inch, both on its inferior and superior borders; there was no tendency to syncope, nor was there any sensible effect produced upon the patient's strength; the pulse mounted to eighty, and became firmer, and more natural. Ordered to abstain from all food, and to have a purging enema.

Vesperi. About five o'clock she was again attacked with severe pain and dyspnoea. Ordered a grain and a half of opium.

At eleven o'clock the opium was found to have had not the slightest influence in subduing the symptoms, and they had, in fact, become almost as urgent as on her first admission; the heart was again enlarged to about midway between the first limitation and the one made after the bleeding. Ordered to be bled to the amount of thirty-two ounces. After the second bleeding the extent of the heart was found to be diminished considerably within the limitation made