PROVINCIAL MEDICAL & SURGICAL JOURNAL.

REMARKS ON THE PRESENT ASPECT OF MEDICINE.*

By W. NEWNHAM, Esq., Farnham.

But the crying evil of the present day is the widely spread contagion of empiricism existing in its various forms, in forms which are too frequently overlooked, but which, though they cannot be reached by legislative enactment, are as fully worthy of attention, and as fearful in their consequences, as if their origin were proclaimed by the broad Government stamp upon their surface.

The past age of medical investigation was particularly characterized by its almost exclusive fondness for narratives of single cases of disease, to the neglect of opinions, and in entire forgetfulness of the axiom, that individual histories are of no value, except in so far as they admit of being classified and arranged, and of thus forming a basis for the legitimate deductions of cool and sober reasoning. This unfortunate bias, however, was the creature of feeling, and arose mainly from the self-gratulation dependent upon an escape from the imaginative diagrams of the mathematical, the reveries of the mechanical, or the wilder musings of the chemical physicians of the olden time, and seemed like a transition from the dreamy region of conjecture, to the positive realities of *fact*. Hence arose a laudable determination to avoid for the future, the rocks and shoals of similar hypotheses—a determination aided not a little by the natural indolence and love of ease, which are so congenial to the human mind, and which have been so much fostered by the superficial and sketchy education of bye-gone years. There is, however, no royal road to excellence; and even among the monomaniacal accumulators of *facts*, there were not wanting those who perceived, that if ever the science of medicine should acquire a greater degree of certainty than it enjoyed at that moment, it could only be obtained by diligent observation, aided by dispassionate reasoning. Facts are of no value, except as the ground-work of opinions; and again, opinions are useless, unless they can be referred to *principles*, upon which the goodly structure of everyday thought, and reasoning, and conduct, may be successfully reared.

This is especially true with regard to *medical facts*; for in addition to many other sources of fallacy, in

recording the history of disease, there exists this peculiarity,—viz., that no two individuals will similarly observe the same appearances, or will derive from them impressions which are identical. This source of error is not indeed limited to medicine, but is also traceable in all except the exact sciences; and it will remain insurmountable, so long as the manifestations of mind are characterized by an infinite variety of physical constitution, and so long as the notices of external objects, conveyed through an infinite series of cerebral organizations, shall produce corresponding, and therefore infinitely varied, impressions, upon the thinking, reasoning, judging principle.

There are, however, general rules in medicine; the first principles of the human constitution are uniform, and that alone will be good practice which consists in applying and modifying these rules, according to the greater or less prevalence of those active principles in each individual case. Here again there are two sources of error; the first, of adhering too exclusively to opinions invested with their imposing but surreptitious garb of general principles; and, secondly, of being induced to modify and change those general principles upon the result of a small number of disjointed cases. The influence of the former constitutes the hypothetical, that of the latter the empirical, practitioner.

We must admit, as a general rule, that in most, if not in all, the numerous effects of mental empiricism, there must be some good, in order to give currency to the associated evil. Unmixed evil is never long tolerated, and therefore some good, real or fancied, must arise from certain plans which have obtained reputation; and in these cases the evil arises not so much from the nature of the remedy, as from its indiscriminate employment for varying, dissimilar, and even opposite conditions. Such is oftentimes the effect of mental impression, as to induce or to supersede disorder. Everybody knows the familiar exposition of both these truths; the former, in the production of hysteria, and many dyspeptic conditions; the latter, in the influence of charms upon ague, in certain constitutions.

Perhaps the characters of empiricism were never more strongly marked than in their earliest incarnation. Paracelsus, an individual without deep learning, disdaining literature, without refinement of mind, skilled in alchemy, astrology, and all the mysticism of that still mystery-loving and quack-creating country, neurological Germany, assuming that disease and its remedies are to be found in the Bible, and that

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an indefinite prolongation of life was attainable by obedience to the will of Heaven, and by relying upon the influence of the planets, rather than by observing symptoms, considering disordered functions, and administering appropriate remedies; and finally, affirming the cure of surgical disease, without the aid of surgical remedies, merely by magical words and cabalistic processes. In this history we trace the earliest sample of the mentalempiric, and the "*Opera omnia*" of Paracelsus, and the "Fallacies of the Faculty" of modern date will one day be consigned to the same unhonoured tomb, with this difference probably, that the one flourished in the dark ages of mysticism, and proved the fallacy of his own infatuation, by an early death; whilst the latter has not the excuse of living in the dark ages, nor the opportunity of concealing, in the nineteenth century, under the ample folds of assumed universal benevolence, the too glaring purpose of "*quocumque modo rem.*"

It is much to be regretted that the monograph upon which we have been recently commenting, should have occasioned the following tempting addition to an advertisement of the chrono-thermal system:—"Fallacies of the Faculty, 'Young Physic.' Under the sportive appellation of Young Physic, the *British and Foreign Medical Review* has at last done justice to the chrono-thermal system. Young Physic is chrono-thermalism in disguise. The great success of this system has reluctantly wrung from Dr. Forbes the humiliating confession that he has been all his life practising in error: 'our system,' he says, 'is radically wrong.'"

The beneficial influence of the Royal touch in the king's evil, if at all true, and if not dependent upon magnetic conditions, must have been based upon that kind of mental agency, through which such an invigorating impulse was given to the constitution as enabled it to take the place of steel and other tonic remedies. But as the practice has fallen into desuetude, it is to be inferred that it has also fallen into disrepute, either from the efficacy of the touch having worn itself out by time; or from the diminishing circle of magic ignorance and superstition; or in consequence of having been superseded by some newer and more attractive object of faith.

We pass over a variety of panaceæ which have fretted their little hour upon this life's broad stage, and then passed into complete oblivion, in order to arrive at two glaring monstrosities, each claiming the same natural birth-place, though emanating from a very different parentage; the one, we charitably hope, originating from the overheated brain of perverted genius; the other, claiming its frigid embryo life from the cool calculating brain of an uneducated peasant,—viz., homœopathy and hydropathy. There is nothing new under the sun,—and it may be truly said of these great heresies that each contains some acknowledged truths, not newly discovered, but established of old. Every error, however fatal, must, as we have remarked already, possess some fraction of truth, in order to its obtaining currency. That which is manifestly false is rejected at once by the common sense of mankind; and there must be some truth in order to render error

specious, and to save it from universal reprobation. So may it be said of homœopathy and hydropathy, that what is true in each is not new, and that which is new is not true. We admit, and daily act upon many of the principles of the former, and we may even believe in the great efficacy of rationally small, and minutely-divided doses; but when we are gravely taught to expect 897 various symptoms to be produced by the millionth part of a grain of common salt; 938 from a similar dose of carbonate of potass; 1,000 from an equal dose of pure lime; and more than all, both in number and absurdity, 1,090 from a co-ordinate dose of its carbonate or common chalk; we shall not, perhaps, be deemed uncharitable in suspecting the veracity or the sanity of the observer. So, also, we feel the value of cold water; it has long been upheld as the great Catholicon for fever, when taken into the stomach, and cold affusion has had its talented and enthusiastic advocates, and perhaps, even now, may have experienced some degree of more than deserved forgetfulness; and we honestly avow our own admiration of cold water universally applied as a means of health, and cleanliness, and comfort, and our conviction of the criminal neglect of this life-preserving agent, even in cleanly England. We aver that the important recommendations of Hippocrates, and Hoffmann, and Currie, should never be lightly esteemed; but when we are invited to swallow all the absurdities of modern hydropathy, we may well hesitate at that grievous fanaticism which has already consigned so many victims to a premature grave. Admitting therefore the small infusion of truth which attaches to these errors, and the semblance of honesty which gives currency to their nefarious influence, we must mention one other property which they possess in common with all other remedies of a similar class, viz., the universality of their indiscriminating application. In all, and precisely opposite states of the system—in the presence, and during the absence of fever—in asthenia and hypersthenia—in anæmia and hyperæmia—in congestive and inflammatory action—in summer and in winter—in every variety of season, and climate, and habit, and constitution—in the incipient stage of disordered function—and in the fast approaching termination of organic disease,—in every age and sex—and under every conceivable variety of circumstance and locality, still the same remedies are applied, and applied indiscriminately.

Before mentioning the principles which regulate the effects of this and other forms of quackery upon the mind, we must stigmatize with severest reprobation, a class of exclusive practitioners, whose conduct admits of no palliation, and whose selfishness is diametrically opposed to the very basis of our self-denying profession. We had thought of mentioning a certain and increasing class of professional exclusives; but we would willingly draw the veil of deepest oblivion over their delinquencies, and we eagerly pass on to notice the effects of empiricism upon the human mind, and some of the more common effects of professional empiricism.

In all the vaunted results of quackery, the good effects are produced, not by the medicine exhibited, but by certain mental influences,—by altered habits of

life,—by implicit credence in the promises held out,—by undeviating obedience to the rules enjoined,—by change of air, exercise, scenery, and association ;—in short, by a combination of many circumstances, all possessing for their basis this one principle—a development of mental confidence, and an excitement of mental belief and expectation, amounting (as is generally the case on subjects of which we have no actual knowledge,) to the strongest degree of fanatical credulity.

Admitting, however, this to be the case, we shall at once perceive that the attachment to quackery is founded upon a principle of our nature, very extensive in its agency, and therefore very difficult of eradication, because the principle of undoubting belief is powerful in proportion to our ignorance on the subject matter of our confidence.

A common result of this principle is, that we constantly do that which we believe we can accomplish, though confessedly difficult ; and that we constantly fail of effecting that, however easy, about which we are desponding, and simply because we are so *desponding*. We digest that which we eat with relish and confidence ; we get indigestion from that which we eat with fear and apprehension. There is no medical man who has not observed the increased benefit arising to his patient from the medical means employed, when that patient pursues those means with unbounded confidence ; and who has not experienced the impossibility of getting on with those whose minds have been set afloat by doubt—by the suggestions of friends—by the unguarded vacillation of the doctor—by questioning the utility of present plans, or by apprehension of any kind. Hence it happens to those patients whose confidence has been exhausted in their own rational medical man, that they throw themselves with unbounded practical credulity into the hands of those who will condescend to more of mystery,—who will reason less and promise more. The unblushing pretender who thinks of nothing but his own interest, and with whom the end will sanctify the means, will be sure of success in such a case, over the honest man of science, because he can promise largely and risks nothing by failure. The instances of credulous success are loudly bruted,—the 10,000-to-1 instances of failure are buried in the grave, and hidden from the sight, as if they had never been. And therefore it is, that so long as we have weak and credulous patients, and so long as we have cases of long-standing malady, and irritable nerves, and exhausted patience, so long shall we find it impossible to control the disposition to encourage quackery by the public, through any legislative enactment.

Here let me ask, do not many worthy and excellent medical men avail themselves of this principle beyond its just and legitimate influence ? So long as they cultivate the principle by inspiring the confidence of their patients, through diligent cultivation of the means of professional improvement, both practical and literary ;—so long as they are known to be men of deep research, and accurate and unprejudiced observation ;—so long as they have a character for promptitude and decision in their measures, and skilfulness in the application of their means to the severest emergencies

of daily difficulty ;—so long as they are acknowledged to be men of good common sense, and always capable of giving a reason for any requirements which they may make ;—so long as they maintain a reputation for veracity and honesty, and transparency of purpose ;—so long as they are known to be men of upright conduct, and are remarkable for kindness of heart, benevolence of feeling and real active sympathy with the miseries of their fellow creatures ;—so long as it is obvious, that though they must live by their profession, yet that their *first object is to do good*, and that they are always ready to join in every attempt to supply every want, *moral* as well as *physical* ; and that from having lived much in the world with an intuitive perception which none but a medical man can possess,—and that from having brought their knowledge of man and his perversities, to the study of man and his morbid conditions,—and from having done so, with views enlarged by general knowledge, and softened by kindliness of disposition, they have acquired a certain superior degree of tact in his management ;—so long will the influence over the patient be legitimate, whose confidence will be well placed, and whose repose will be securely rivetted on the assurance that his medical friend will not deal in promises beyond what there is a reasonable prospect of fulfilling.

But when the professional man seeks to establish his claims to confidence on less transparent grounds,—when he enwraps himself in mystery, and purposely mystifies for the sake of beclouding his patient,—or when he undervalues the means of art, and proclaims the omnipotence of nature, guided by his regiminal views,—or when he arrogates to himself a knowledge superior to others, and a power to relieve inherent in himself ;—when he strangely undervalues the opinions and judgment of his compeers, in order to exalt his own conceptions ;—or when he makes up for his ignorance of general, scientific, and professional literature by confident assertion,—when he unworthily condescends to act upon the agitated mind of the invalid, to deliver a fearful prognosis in order to enhance his skill if the patient recover, and to secure for himself a safe retreat, if the issue of the case be unfortunate,—when he seeks to exalt himself by the history of his own cures, and to abuse his patient's mind with fictitious or exaggerated narratives,—when he stoops to give up his own opinion, or rather to possess none, but to take the shape and mould of those with whom he is associated,—when he condescends to convey false notions of present right and wrong, and false views of religion, only to pacify and please on the one hand, or to excite fears and to promote influence on the other,—and finally, when he gives too good, or too unfavourable a view of a case, in order to maintain his own influence, then is that influence illegitimate,—then is he deeply guilty of mental empiricism.

These general views will naturally introduce a very few remarks on the various forms assumed by this deeply-rooted and widely-spreading disease, the first and most frequent of which will be found in the routine practitioner.

There is in the human mind a love of ease and

indolence which it is very difficult to supersede; it delights to revel in the luxurious listlessness of aught which will save it from the trouble of thought, and therefore it is so much easier to prescribe the same form of medicine for measles, or scarlatina, or typhus, without reference to the peculiarity of constitution, or season, or type of malady, and a thousand other modifying circumstances, than it is to notice the peculiarities of each individual case,—the temperament in which it occurs,—the relative degree in which the several tissues are disordered, and the products of secretion are changed,—the amount of general and local irritation,—the primary disturbance of the system, and the direct and indirect influence of this disturbance upon other organs and functions of the body;—in fact to trace back symptoms to their causes,—to estimate their relative importance and probable influence,—to weigh the effect of remedies already exhibited,—to reason out the indications arising from all these, and many other contingencies,—and then to prescribe for the *individual* efficiently, that we cannot be surprised at the ordinary result. Nothing short of an enthusiastic love for our profession,—a deep sense of the moral obligation to exert our best energies on its behalf,—an accurate estimate of the value of human life, and of the responsibility involved in the care of its preservation,—and a conviction that we are pursuing the good of our patients—not *our own good*—can save us from falling into this form of empiricism, or can enable us to exercise the habits of observation, discrimination, and ratiocination, which will alone preserve us from the engulfing vortex of routinism.

A second form of professional empiricism is to be found in the inert practitioner. The same causes are operating as in the former case, only they are producing a different result, probably according to the constitutional tendencies of the individual so practising. It is exhibited in the method of treating disease, and perhaps in this respect it may be less dangerous than some other forms of quackery, because it leaves more to the agency of nature, and her agency, when neither excessive nor defective, nor misdirected, is essentially conservative. The inert empiric gives himself little trouble in the investigation of malady; he prescribes some very trifle, gives what will do no harm if it effect no good, and under the worst of circumstances quiets his conscience by the reflection that he at least has not destroyed his patient. But this is a fatal mistake—the deep prejudice of lethargic indolence! For the moral prohibition “thou shalt not kill,” involves within its meaning the active zealous employment of every possible means for the preservation of life and health, and he who suffers his patient to die from want of activity in his treatment, is as deeply guilty as if he destroyed him by ignorant and erroneous activity; in the one case death is occasioned by withholding the means of recovery, in the other by the administration of ill-timed remedies. Now, this inertness generally arises from scepticism as to the efficacy of medicine, and this doubt leaves the prescriber in so uncomfortable a state, as to paralyse his energies, and to place him spell-bound within a magic circle of listless indifference

and hopelessness, having its prototype in the other forms of scepticism, all originating from one common centre,—viz., the want of an *unprejudiced mind*, and the absence of intelligent investigation, with a desire after the conviction of truth.

The incarnation of a third form of professional empiricism is to be found in what is designated the *elegant prescriber*. The real object to be accomplished is entirely lost sight of in the design of directing what will be agreeable to the patient, and the efficacy of the medicine is subordinate to the gracefulness of the *vehicle*.

Another and a frequent mode of empiricism consists in taking partial and even exclusive views of disease. A favorite hypothesis is selected, and facts, and circumstances, and symptoms are so distorted, as to be perverted towards its support. This form of quackery is generally found in combination with splendid talent; indeed it requires the employment of talent to sophisticate truth to such an extent as to give currency to propositions so monstrous! And yet so it is, some favorite organ is fixed upon as being the source of all imaginable ills, and to it, primarily or secondarily, are referred all the morbid actions of disordered health. In the history of this exclusive pathology, the stomach, the liver, the heart, the brain, the kidney, have all possessed, even within our own recollection, their respective idolatrous votaries, and that, too, among the master-minds of our profession. But they were master-minds over others most perniciously, inasmuch as they imbued the young, the inexperienced, and the unthinking, with most mischievous prejudices; yet they were not master-minds to themselves, inasmuch as they allowed their judgment to be warped by exclusive, narrow, and injurious views—injurious even in their own hands, and destructive in the hands of others who had not the power to discriminate their weaknesses from their brilliance.

Again, the professional empiric is frequently to be found among two very opposite classes,—viz., the semeiologists and the pathologists; the first prescribing only for symptoms, without giving himself the trouble to inquire after the organic causes of those symptoms, almost always, if not always, dependent upon the functional disorder of some one organ of interior life; the second going equally wrong in the opposite direction, exhausting his energies in the vain endeavour to ascertain the precise pathological condition of the disturbed organ, and forgetting the constitutional irritation which is going on, the particular nature of that constitution, its modifying influence upon every local morbid action, and the thousand other circumstances, both extrinsic and intrinsic, which should be brought to bear upon its maladies, and both going wrong in this one particular,—viz., that they have prescribed without due consideration, without the knowledge they might have attained, and therefore empirically.

The love of novelty may be stated as another of the hydra-heads of empiricism. Almost every week—certainly every year—furnishes us with some new method of cure, some new remedy, or some novel application of an old one; and by many these novelties

are taken up, because they are new, with all the ardor of a first love, to be pursued for a time with undiminished attachment, but to be followed, ere long, by disappointment and neglect. Hence it often happens, that that which has been extravagantly extolled, is as unjustly decried, and the real benefit to mankind is frequently lost between the ultra zeal of inordinate attachment, and the cold disdain and frigid indifference which arise from the discovery that such attachment has been misplaced.

Fashionable medicine may be noticed as another empirical product. There are revolutions in medicine which may be termed fashions, and it is the subjection of the understanding to such changes, which it is so difficult to avoid, and which is here so particularly stigmatized. For example, with regard to venesection, we have lived long enough to hear the lancet banned as "that minute instrument of mighty mischief," and extolled as a sovereign remedial agent in almost all kinds and stages of malady, and we have lived to see the successive rise and fall of hypotheses, in which the necessity of bleeding by pounds rather than by ounces has given place to the importance of not abstracting the vital fluid at all, or at all events, in the most niggard quantities; and again, we have witnessed the resuscitation and decline of these antipodes. Happy, indeed, if we ourselves have escaped the trammels of these conflicting errors, and have been enabled to adopt that *just milieu* which it is so difficult to preserve. At the present period, we have been witnessing for some years past, the decline of that heroic system of treatment for which our country has been famous. Our practice in this respect has been miserably extravagant. Re-action was certain of taking place; and so it has been gradually cooling down, till we now witness the rising of another—the study of the natural history of disease—an old acquaintance with a new name; nothing more or less than a revival of "*la Médecine expectante*," which we venture to predict will be no improvement upon its predecessor; but which will have its fashionable hour, will be only a little less mischievous than the heroic system it supplants, and after inflicting its customary measure of evil, and administered to the glorification of its early patrons and advocates, and disappointed its disciples, and destroyed a moderate portion of human life, will sink into oblivion, and give way to some newer hypothesis, or, possibly, leave behind it traces of rational medicine to enable our successors to advance the healing art some real steps towards practical improvement. Would that we could rely with any confidence upon such a prospect! But we see no signs of such improvement in the cultivation of the human intellect to justify such a confidence.

One other form of professional empiricism is to be found in the adoption, and almost universal application of some *favorite remedy*. Perhaps this remedy shall be a very important agent when rightly and duly administered; and the evil consists, not in the insufficiency of the remedy, but in its almost universal application. This is an error into which enthusiastic genius is very apt to fall; it is delighted with the apparently miraculous effects of the medicine in some cases, and

by degrees it extends this agency to other cases, which possess nothing in common with the former, and which, therefore, cannot be benefited, but are in reality excluded from the benefit which ought to be derived from a more appropriate treatment. The empirical employment of carbonate of iron—of hydrocyanic acid—of quinine—of cold water—and of various other remedies, will suggest frequent exhibitions of this mode of quackery.

Such then, may be stated as a sketch of the pathology of professional empiricism, and it is doubtful whether any one can plead *exemption—entire exemption* from some infusion of one or other of these evils; some of them arising, as they decidedly do, from the excess of good action and good feeling; yet, be it remembered, that the excess of good is a caricature of evil!

Nor is it wonderful that such should be the case, for we are placed in situations where the demand upon our powers is very great, and the smiles of an approving conscience almost our only reward;—where the public is exacting upon our time, and niggard in its recompense;—and where, therefore, there is great danger lest we fall into *routine* from the positive exhaustion of physical energy, and the listlessness produced by unrequited toil! Some have been forced into the profession with total disinclination for its scientific pursuits or its practical details, and therefore become *inert* in action, averse from study, and sceptical in theory. Others have contemplated the injustice of the world, have seen successful manner, and unsuccessful talent, and having no very high idea of medicine, and a most imperative necessity for the means of subsistence, have sought to secure the latter object, by pleasing rather than by benefiting their patients. Others, with the versatility of genius, have so devoted themselves from a time to one particular form of malady, that the idea had become exclusive—they can distinguish nothing but their favorite hypothesis, and they have become veritable monomaniacs! Others, again, are so completely influenced by novelty, that to be new is a sufficient attraction to their minds, and an adequate passport to being accepted as true—to being dearly cherished and highly prized, till the zest has worn off by time, and it is then thrown away as a thing of nought;—while others possess minds so open to fashionable impression, or so easily moulded by favorite hypotheses, or so engrossed by favorite medicines, that they yield the solid acquirements of talent, and the native inspirations of genius, and lie immolated upon the altar of *fashion*.

And what are the appropriate remedies for these evils? for the knowledge of a disease is more than half its cure, and the only use of rendering prominent these infirmities is, that we might aid in the restoration of the sufferers?

The essential character of all these modes of empiricism consists in a want of the due employment of the reasoning powers, and therefore the appropriate means of cure are to be found in habits of greater self-denial,—of more accurate observation,—of more devoted thought,—of more logical reasoning,—of more enlarged views,—more defined indications,—more solid

judgment,—juster conclusions,—more untiring zeal,—more extensive information,—greater circumspection,—more accurate discrimination, and greater love for the scientific pursuits, and practical duties of every-day life.

A REPLY TO DR. OGIER WARD, RELATIVE TO THE DISEASE, SPASMA GLOTTIDIS.

By JOHN RICHARD WARDELL, M.D., Edin.

"Nonnunquam etiam errorem creat similitudo."—*Cicero*.

"This opinion of his principles (the person who has taken his principles from doubtful propositions),—let them be what they will—being once established in any one's mind, it is easy to be imagined what reception any proposition shall find, how clearly so ever proved, that shall invalidate their authority, or at all thwart with these internal oracles; whereas the grossest absurdities and improbabilities, being but agreeable to such principles, go down glibly and are easily digested."—*Locke's Essay on the Understanding*.

TO THE EDITOR OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

SIR,—Since my removal to London, a multiplicity of circumstances have precluded the possibility of any attention being paid to literary concerns, and indeed it was not till last evening that I perused Dr. Ward's paper published in this Journal on the 22nd March, or I should previously have replied to his communication. I now, Sir, however, ask the indulgence of your columns, and beg respectfully in a brief manner to notice certain points in Dr. Ward's paper, in which he specially enlarges upon the doctrines set forth, relative to this affection, by myself, when commenting upon the cases published some months ago. It may here be briefly observed, that after carefully reading over Dr. Ward's paper, the drift of the argument which the writer endeavours, (but I humbly think unsuccessfully) to set forth, is that these cases of my own, to which reference has just been made, as well as similar examples, that subsequently to these appeared in the medical periodicals, were not illustrations of a spasmodic affection, but veritable instances of inflammatory disease,—in other words, of acute laryngitis: this then is the *questio vexata*.

"In my last communication of an obscure case of sudden death, with enlarged thymus," says Dr. Ward, "I alluded to some cases of laryngeal affection, lately published in the 'Provincial Medical and Surgical Journal,' by Dr. Wardell, respecting the nature of which I differed from the author; and I stated my intention to return to the subject at a future period, and to describe a case which had recently fallen under my observation, which seemed to me, though identical in its symptoms with Dr. Wardell's alleged cases of spasm of the glottis, to be PURELY INFLAMMATORY." This case which Dr. Ward goes on to describe, is in the instance of a young woman, precisely the cases in which we observe, most frequently, anomalous hysteria—spasmodic attacks. When Dr. Ward first saw her she was in a semi-recumbent posture, with tumid face, bright and prominent eyes, distended nostrils, gasping for breath, and

exclaiming in a whisper she was choking; she threw her arms about, the breathing was stridulous—indeed there were all the manifest symptoms of approaching asphyxia, from, of course, partial occlusion of the glottis, which symptoms suddenly came on at four o'clock p.m. Now, Sir, would it be reasonable to suppose—would it be consistent with the views of one but little conversant with pathological and physiological enquiries, to conclude that this immediate seizure at four, p.m., this sudden pain and rigidity in the larynx, were the results but of inflammation? Certainly it must at once be conceded that the inflammatory phenomena never supervene so momentarily. The dyspnoea, the danger, became more and more urgent and obvious; Dr. Ward was afraid to leave her for more than a few minutes, and determined upon laryngotomy. He returns, the patient swallows with much difficulty, so much so as if she had quinsy,—the throat is examined, but no traces of inflammation are discoverable, a small quantity of alum is blown into the throat, the patient coughs, a clearer voice is momentarily produced, the breathing at once becomes freer, and the respirations and pulse directly fall thirty per minute! Can Dr. Ward, Sir, or any of your readers seriously affirm, that inflammation, undisputed veritable inflammation, would, under any circumstances,—by any agent,—in any organ,—in any tissue, in so sudden, so precipitate a manner supervene, and by the application of a little powdered alum, (this asserted therapeutic action of which I was certainly before ignorant,) be as speedily dispersed?—and could it for a moment be doubted that these were spasmodic and not inflammatory symptoms? Had Dr. Ward, immediately on witnessing this case, (manifestly labouring under partial closure of the glottideal chink,) but rotated his finger freely in the throat, and thus produced a fit of coughing or the efforts to vomit, there is not the least doubt that such expedient would have been followed by as speedy a relief as that which succeeded the alum, for had not the coughing taken place, I fear the employment of the agent would have been inoperative. It has long since been known, and if Dr. Ward will but consult the various writers on the subject he will find it recorded, that the induction of coughing and efforts to vomit, during these dyspnoeal paroxysms are highly desirable, they produce relaxation of the muscles proper to the larynx, the air is then freely admitted, and the patient speedily relieved, as in the manner described by Dr. Ward in his example. He also tells us that as soon as the vomiting came on, she was out of danger, (had this vomiting with such celerity reduced the inflammation?) and soon afterwards the countenance became so natural—so free from congestion, that Dr. Ward at his next visit, almost failed to recognize his patient, which forsooth Dr. Ward termed the "subsidence of the fever!" The facial congestion, the prominent eyes, the distended nostrils mentioned in the case, of course resulted from pulmonary obstruction. The author then proceeds to comment upon the case, recounts the symptoms, the sudden affection of the larynx, dyspnoea, loss of voice, stridulous breathing, etc., "clearly indicative," observes he, "of physical obstruction to the passage of the