child suffered severely from pain and tenesmus, accompanied by frequent bloody stools, the dejections resembling currant jelly, with water, accompanied with much fever; and having resisted leeching, blistering, castor-oil aperients, with opiates and astringents, until the 26th of September, the following mixture was ordered:—
R. Fel. Bovis Inspiss., gr. xij.; Tinct. Opii, m. x.; Mucil. Acaciæ, oz. j.; Chloroform., m. vi.; Misturæ Amygdal., ad oz. iij. Fiat mistura; capt. sextam partem quartis horis. Under this treatment, with occasional doses of Dover's powder, this child speedily recovered, and is now, October 7th, convalescent.

I am, Sir,

Your obliged servant,
 THOMAS HEWLETT.

TRAUMATIC FISTULA OF STENO'S DUCT: CURE COMPLETED DURING A CONTINUED FEVER.

By TUTHILL MASSY, M.D., Exeter.

The patient was by occupation a mason, 43 years of age. When he presented himself to me, in September, 1847, he stated that he had fallen off a scaffold, six feet raised from the ground. He had a lacerated wound, extending from below the centre of the right malar bone to more than an inch. The eye and nose on that side were greatly swollen. The wound was brought together with strips of adhesive plaster. Ordered an aperient, with directions to live low.

On the third day, when eating bread, he felt water pouring down his cheek; his neck and shirt were quite wet.

I removed the dressing on the fifth day, and got him to chew a bit of bread, when the fluid poured out; it then formed a little stream trickling down the cheek.

On the seventh day the wound was united almost throughout the entire extent, leaving two small openings at each extremity, sufficient to admit the point of Anel's probe, and through which flowed, (as the man stated,) "a wine-glass of water during each meal." Touched the openings with a pencil of Nitras Argenti. Applied a lint compress.

Tenth day. He was attacked with the fever which was then endemic in the adjacent lodging-houses. Complained of a heavy pain in the head, with loss of sleep and appetite; tongue dry, and coated with a white fur; respiration hurried; pulse quickened.

Eleventh day. Great thirst; the saliva has ceased to flow.

Thirteenth day. Fever continues; urine diminished in quantity.

Fifteenth day. Fistulous openings closed; a hard oval tumour occupies the entire extent of the cicatrix, not in the least diminished by pressure.

Twentieth day. The tumour continues tense, and unyielding to continued pressure; fever almost gone; appetite returning.

5th of October, being thirty days. My patient is convalescent. The tumour has disappeared; the cheek is natural; and the saliva escapes through its own opening into the mouth.

How has this duct become a continuous tube? Has lymph united the parts by forming a sac between the divided extremities?—or have the walls of the tumour formed the connecting link?

CASES OF POISONING BY BELADONNA.

TO THE EDITOR OF THE PROVINCIAL MEDICAL AND
 SURGICAL JOURNAL.

SIR,

I forward you two cases of poisoning by belladonna, occurring lately in my own practice, which are interesting as bearing upon the late inquest at Sheffield, where the verdict of the jury appears to me to have been the opposite of that to which a careful review of the evidence would legitimately lead.

Your obedient servant.

SAMUEL COWAN.

Bath, Oct. 5, 1848.

CASE I.

June 25, 1848. General W., aged 73, a man of hale robust constitution, swallowed in mistake for a henbane draught, part of a lotion, containing, as I afterwards calculated about twenty five grains of the extract of belladonna dissolved in Linamentum Saponis.

I was sent for, and saw him at 11 p.m., about twenty minutes after the accident, mustard and water having been previously administered to excite vomiting, without effect. I found him perfectly collected, complaining of slight vertigo, with staggering gait; the surface and extremities cold; the face pale; indistinct articulation; pulse feeble, 74; pupils not dilated. The stomach-pump was used, and the stomach freely washed out, the fluid returned containing a greenish mucus, convincing me by its smell that the poison was belladonna. Small quantities of brandy and water were now given. Vertigo and insensibility gradually increased; the temperature of the skin and extremities sank; the pulse became weaker, and fell to 55. The pupils were now fixed, scarcely at all dilated, and he sank at twelve p.m. into a state of profound coma, from which it was impossible to rouse him. The dysphagia which had more or less shown itself since the commencement, increased to such an extent that it was impossible even to give him a teaspoonful of fluid without threatening suffocation. Mustard cataplasms were applied to the trunk and extremities.

12 p.m. The pulse gradually rose to 130, and became hard and bounding in character; the vessels of the head were congested; face flushed; sclerotics injected; pupils fixed, very little dilated; breathing stertorous and laboured; extremities cold, in fact all the symptoms of a well-marked case of apoplexy. I now opened the temporal artery and bled him to fourteen ounces; the pulse very shortly fell to 60, became softer, more compressible; face became paler; and the temperature of the trunk and extremities returned. The stupor was still profound, with stertorous breathing, pupils fixed, dysphagia extreme. A large turpentine enema was thrown up the bowel.

At 2 a.m., the left side of the face was much convulsed; the left arm and leg cold and apparently paralysed; convulsive movements of the right side; the coma and stertorous breathing remaining; pulse