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THE RETROSPECTIVE ADDRESS,
DELIVERED AT THE SIXTH ANNIVERSARY OF THE
READING PATHOLOGICAL SOCIETY.

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(Continued from page 398.)

VII.—FEVER.

On the 30th of September, 1846, Mr. Vines read a paper
On the Epidemic Fever then prevalent in Reading.—

Mr. Vines said his situation as surgeon to two large parishes in this town, as well as to the Reading Dispensary, independently of his private practice, had given him more ample opportunities of observing this epidemic than could have been possessed under other circumstances. His observations were intended to include the period of the last twelve months,—viz., from the 1st of September, 1845, to the 1st of September, 1846. The number of cases which came under his notice during this period, amounted to 306. The smallest number of cases occurred during the months of January, April, and June, and the largest number in February, July, and August. The number of deaths within the same period amounted to twelve, and of these, the largest number was in the months of March, July, and August, which corresponds nearly to the periods of the greatest amount of cases. According to this calculation, the average proportion of deaths was about four per cent. With regard to the localities in which the fever prevailed, the most densely-populated neighbourhoods were not always the most prolific. Isolated cases have occasionally occurred in well-ventilated places, but in these instances a communication has been generally traced with individuals or localities previously infected. The fever prevailed most extensively and most severely at the east end of the town, along the river Kennet. Throughout the winter and early spring months determination to the pulmonary tissues was a marked concomitant of the disease, which Mr. Vines thinks is attributable to the mildness and damp of the winter, and the low situation of the Kennet.

The fever throughout the year, was generally characterized by debility, or where acute symptoms set in, a rapid prostration of the vital powers has quickly succeeded. Hence bleeding or depletion of any kind has been scarcely warranted in the majority of cases. The mild, soothing, and supporting plan proved the most successful. Where constipation has

been present, (which was, however, rarely the case,) the saline aperients with occasionally a dose of castor oil, the Liq. Ammonia Acetatis, the Nitrate of Potass, and Carbonate of Soda, had been freely administered. Where diarrhoea has existed, the Bicarbonate of Potass, Gum Acacia, Sp. Aetheris Nitrici, and Ipecacuanha, were given. The tenderness of the bowels rarely required leeches; blisters and mustard poultices were generally sufficient, with small doses of Hydrargyrum cum Creta frequently repeated. In no instance has calomel been given to affect the system. The pain of the head was generally relieved by a blister at the nape of the neck. In a few cases exhibiting a typhoid aspect, quinine, opiates, and port-wine, freely administered, were found of great utility.

In conclusion, Mr. Vines stated that the effects produced in the present epidemic have been principally upon the mucous membranes. The whole mucous tissues of the respiratory and digestive organs have been in turn affected: at one time the lining membrane of the throat and fauces; at another, the bronchial membrane; and latterly, the gastro-intestinal canal has been more particularly the seat of the morbid process; and the extent to which these different tissues have been diseased, has modified, in a certain degree, the severity of the fever, and produced such re-action on the nervous system, as tended materially to favourable or fatal results.

Mr. Vines illustrated these views of the constitution of the epidemic by appropriate cases, which I regret not to have room for inserting.

When Mr. Vines read this paper in September, the epidemic was at its intensity. His report, however, ceased with the first day of that month, after which time he found the fever to become more fatal; so that taking the cases from January, 1846, to January, 1847, the proportion of deaths in his practice was five per cent. upon the whole amount of cases.

Upon examining the records of the Dispensary, with a view to ascertain the mortality of the late epidemic, I find that from June to December, (both inclusive,) 155 cases of fever were treated, of which fifteen, or about ten per cent., died. These cases were distributed through the seven months in the following manner, showing a progressive increase and diminution in their number:—June, 6; July, 21; August, 40; September, 48; October, 24; November, 7; December, 9.

Sequelæ of Fever.—As a corollary to the above interesting account of our epidemic, I may mention,

that on the 3rd of March, 1847, Mr. Walford related the case of a child, which he had treated for fever in the first instance, but in the course of a few days the head symptoms became so prominent, that he began to doubt whether disease of the brain was not the primary affection. He daily expected the child to die, but diarrhœa with green stools set in, with relief to the head, and she afterwards got better. Some time afterwards extreme pain of the knee and hip came on, which could not be accounted for. The child still continued to suffer from the hip, with all the symptoms of morbus coxæ.

Mr. Harrison stated that the father of the child had suffered in the same way.

Your reporter mentioned that during the late epidemic, a case similar in some respects to Mr. Walford's had fallen under his notice. A boy, five years of age, was convalescent from typhoid fever, when he complained of severe pain in the hip and knee, chiefly in the latter; he was quite unable to walk in consequence. Some incipient disease of the hip-joint was at first suspected, but by rest and tonics it had gradually and entirely recovered.

Abscesses in Scarlatina.—At the same meeting Dr. Cowan mentioned the case of a lady who suffered from scarlatina; abscesses formed in the legs, shoulders, and beneath the mamma, which were opened. She was then in a satisfactory state.

Croup in Measles.—On the same evening also Mr. Walford exhibited the larynx of a child who had died of croup, which supervened some time after measles. The chordæ vocales were very much thickened. Mr. Walford considered the chief interest of the specimen arose from the connection between croup and measles.

VIII.—SURGICAL DISEASES.

The proudest boast of modern surgery is, that it shines more in the skill, with which it preserves the injured parts of the body, than which it formerly displayed in their removal. This remark, perhaps, applies more truly to the extremities than to any other division of the human fabric. Limbs which some time back would have been doomed to immediate amputation, for compound fractures and other injuries, are now not only preserved, but rendered as serviceable as ever to their owners. Still it is too often found, even at the present day, that the non-union of bones after fractures drives patients to submit to the loss of a limb, in preference to keeping it as a useless and troublesome appendage. Any operation, therefore, which is calculated to overcome this difficulty, is well worthy of our attention, and I have much pleasure in bringing before the notice of this Society the following successful instance of such a result:—

Operation for Ununited Fracture of the Forearm.—On the 5th of August, 1846, Mr. May introduced to the Society the patient upon whom he had some time previously successfully operated by excision for an ununited fracture of the radius and ulna.

An account of this case has already been published by Mr. May in the *Medical Gazette*; it will not, therefore, be considered necessary to repeat it in this place.

Suffice it to say, that the sanguine anticipations of success, which Mr. May had from the first entertained, were satisfactorily proved to the members of this Society to have ensued from the operation. Perfect bony union had taken place, and the motion of the hand, which many had supposed irrecoverably lost, was already to a certain extent regained, and there was reason to hope would still be much improved.

At our last meeting, (May 26th,) Mr. May stated that this case was still progressing very favourably, and that he had every reason to anticipate that the man would ultimately regain the entire use of the limb.

I need not recall to your recollections that Brodie, in his recent lectures on Surgery, has uttered an anathema against this operation, which he says "no surgeon with a moderate share of prudence would perform." It is therefore of the highest importance that its merits should be tested in the crucible of experience, and that each successful case and each failure should be recorded.

Treatment of Burns.—The variety in the kinds of applications which have been recommended by surgeons to burnt surfaces, would lead one to suppose that they were not yet quite satisfied with those in general use, and that there was still room for some suggestions with respect to them. Although your reporter himself would venture to believe that surgeons have been too much on the look out for *specific effects* in the various applications used in the treatment of burns, and that they should be rather treated on *general principles*, yet as he knows that great success has in many instances followed Mr. Bulley's plan of treating these cases, he has much pleasure in calling your attention to a paper on this subject, which was read before this Society on the 3rd of February, 1847. Mr. Bulley stated that he had introduced this mode of treatment to the notice of the profession, and that it had met with the approbation of all those of his medical brethren who had made use of it. Out of six cases of burns which had been brought into this hospital during the last six months, three died; the survivors were treated with the treacle dressing. The plan adopted is to steep cloths in a mixture of one part of treacle to two of water, and apply them over the burnt surface. He attributed the beneficial results of this mode of treatment to the prevention of those metastasis of inflammation to internal organs which were so liable to take place after severe burns. It should be applied warm, (at a temperature of 98°.) He attributed its remedial power to fermentation which takes place in the treacle. He had found that anything producing cold renders the liability to metastasis greater.

I may state, that on the 2nd of December last, Mr. F. Bulley had exhibited a patient who had had extensive burns of the arms, neck, chest, &c. They had been treated with the *treacle dressing*, and were then nearly healed.

In the discussion on the subject, Mr. Vines mentioned a case where a patient was suffering from rheumatic pains of the legs, and had been treated by eminent men in various ways without relief, when an old nurse

recommended the legs to be wrapped in flannel soaked in treacle for some days, which procured him complete relief. He therefore thought there was some sedative influence in the treacle.

Fracture of the Clavicle.—On the 10th of June, 1846, Mr. F. Bulley stated that he had under his charge in the Hospital, a man, whose clavicle had been fractured in the effort of mowing. The fracture was situated near the acromial process. There was but slight displacement. The fractured bone was kept in situ, by a strong buffalo-leather splint, covered with adhesive plaster, and bound down by straps of emplastrum roborans, which, with a pad in the axilla, and the arms bound to the side, he generally finds successful. Mr. Bulley, also uses this leather in cases of fracture of the radius near the wrist with great advantage.

Dr. Bradshaw remarked that the leather splints possessed an advantage over those made with pasteboard, in not occasioning that irritation of the skin which was frequently produced by the latter, owing to the pitch or tar contained in them.

Hernia of the Stomach.—At the same meeting Mr. Harrison presented to the Society a rough cast of the upper portion of the abdomen of a man, whose case he thus related:—While walking along the street the man was seized with a violent rigor and such excessive pain that he fell to the ground. He had, however, recovered before Mr. Harrison got to him. The cause of his sufferings remained unexplained for three or four days, when Mr. Harrison discovered a small tumour in the upper part of the abdomen, to the left of the left rectus muscle, which disappeared on pressure, and dilated on coughing. It appeared to be hernia of the stomach, for if it were the colon, it would hardly have produced so great an amount of suffering. It did not require any treatment beyond the mechanical support of a truss to prevent it from protruding, and it was chiefly with a view to inquire what apparatus was best adapted for the purpose, that Mr. Harrison brought the case forward.

Mr. F. Bulley stated that there was an apparatus, invented by Weiss, consisting of a circle of ivory adjusted by a spring and a belt, for umbilical hernia, which he thought might suit this case.

IX.—DISEASES OF THE SKIN.

Albinism.—On the 30th of September, 1846, your reporter exhibited to the Society three female children from Padworth who are albinos, of the respective ages of seven and five years, and of nine months. The complexion of the father was brown, and the mother dark. The eldest boy, nine years of age, was of the same brown complexion as his father, and so was the second boy, three years of age. The two elder girls were unable to bear the light of the sun, and could only see objects when very close to the eye. The mother had borne six children; her first-born, a female, was likewise an albino, and died at the age of four days. The three surviving girls were very liable to bowel complaints.

X.—STATISTICS.

On the second of September, 1846, Mr. May read

a statistical table of the cases of death which had occurred in his practice between August, 1845, and August, 1846, in which the modes of death are arranged in the order in which they occurred,—as apnœa, asthenia, coma, &c. This table has already appeared in the *Medical Gazette*, and is therefore probably familiar to you all.

I have now, gentlemen, gone through all the cases which have come under our notice during the past year. You will, I trust, agree with me in thinking that many of them possess great interest; and should their recapitulation have proved wearisome to you on the present occasion, the blame, I fear, attaches to your reporter. If to some I may have appeared too prolix, the best apology I can offer you is the anxiety I have felt to do full justice to every member of the Society.

The great length to which this address has extended will prove that we have not had to complain of any lack of materials for discussion since our last anniversary; still we cannot but remark that we have mainly depended upon the presentation of morbid specimens, and that independently of those specimens, very few papers have been read during the past year. Now, though I by no means wish to detract from the interest and instruction which is to be found in the recital of cases which have terminated fatally, and in the examination of the organic changes which have resulted from disease, still there is an equally important class of disorders, which do not ordinarily go on to a fatal termination, and of which we never have the opportunity of examining the morbid alterations upon this table. Such disorders at present seldom come under our notice; and yet no one can doubt that in a practical point of view, it is of much more value to the practitioner to treat successfully the curable diseases, than to be learned in the pathology of those which are unfortunately incurable. I would therefore venture to suggest that some means be adopted for securing at each of our meetings the reading of a paper, and I feel assured that no member will decline to take his turn, which cannot come more than once a year.

In conclusion, Gentlemen, it only remains for me to thank you for the patience with which you have listened to this, I fear too lengthy, address, and to express a hope that each succeeding year may produce a reporter more worthy of your Society.

ON FUNCTIONAL DISORDER OF THE LIVER.

By ROBERT HUTCHINSON POWELL, M.D., Tunbridge Wells.

(Read at the Annual Meeting of the South-Eastern Branch of the Provincial Medical and Surgical Association, held at Reigate, June 30th, 1847.)

It is proposed in this paper to notice briefly some of the more frequent causes and modes of actions, with the principles of treatment pertaining to, certain functional derangements of the hepatic system; but the limits within which I am necessarily confined, will prevent