of this or any other solvent which may be suggested, although it may relieve, is not the curative agent. For this we must go deeper into the causes, and attend to the pathological condition of those organs principally concerned in the primary assimilating processes upon which the excess of uric acid and its compounds I believe chiefly depends. I would not on this account depreciate the value of such a medicine as the phosphate of ammonia; on the contrary, as you have seen, I hold it of the highest value in lessening irritation and the urinary formations, at the same time that we are endeavouring to remove the primary cause of the deposit. Both of course are points of the highest importance in our treatment, and should be remembered as such.

20, Walcot Parade, Bath,
September, 1847.

CASE OF GENERAL ANASARCA;

TREATED BY DIGITALIS, GRADUALLY INCREASING
THE DOSE TO THE FULLEST EXTENT.

By DONALD M'DONALD, Esq., M.R.C.S., Tiverton.

On August 14th, 1847, I was consulted by Mr. T. P., aged 56, for general anasarca. He has been for many years occupied in agricultural pursuits, but his circumstances of life never required his exposure to vicissitudes of temperature. He states that he has been inclined to corpulency for some years. His habits have been rather those of a *bon vivant*, although he never greatly indulged in the use of alcoholic drinks. He has become moderate in his living since the commencement of his illness, (about two years,) in fact he has been quite obedient to the instructions set down by his medical advisers.

I found him in the following state:—Tumultuous action of the heart; frequent pulse; sense of weight and oppression in the region of the heart and epigastrium; dyspnoea at times very severe, amounting to orthopnoea; extreme difficulty (indeed an almost impossibility,) in mounting a hill; flatulence; frequent syncope; countenance with a distressed expression; anasarca general. The infiltration through the lower extremities was so great, that had not the remedies taken immediate effect, I should have had recourse to puncture on the morning of the 3rd day; bowels regular; urine very scanty, depositing a red sediment. The cause of the anasarca, (agreeably to the symptoms above given,) was disease of the heart and valves. Upon applying the stethoscope the following signs were revealed:—Murmur distinct to the right of the mesial line; distinct purring tremor. A *bruit de soufflet* attended the least exertion. In addition to these signs there was general venous congestion of the surface, more particularly the face, lips, neck, and hands. The jugular veins were much dilated and pulsating synchronously with the heart. My diagnosis was this:—Induration of the tricuspid and mitral valves, the latter to a less degree, and hypertrophy of the left ventricle. This state of things will therefore satisfactorily account for the supervention of anasarca.

I will just mention that he had given himself up to die some days before consulting me, from having experienced no relief from several members of the profession, under whom he had consecutively placed himself, and from the firm conviction that he was rapidly sinking and far beyond all aid.

August 14th. As I mentioned above, this was my first day's attendance. I ordered him:—

R. Pil. Hydrarg., Pulv. Scillæ, utr. gr. iv. M. Fiat, pil. ij., hora somni sumendæ.

The liver being somewhat at fault, the above was prescribed to ensure a supply of proper bile.

R. Tinct. Digitalis, m. xv.; Potassæ Acetatis, dr. j.; Sp. Juniperi Co., dr. ij.; Decoct. Scoparii Co., dr. xiv. Fiat haustus bis quotidie sumendus. Animal broths twice a day. A little gin and water at night.

15th. Rept. pilulæ. Rept. haustus cum Tinct. Digitalis, m. xxv., bis quotidie. Diet, &c., as yesterday.

16th. The patient this day stated that he felt better already. He said, to use his own expression, that he was not "so stiff."

Omittantur pilulæ. Rept. haustus bis die, cum Tinct. Digitalis, m. xxv.

17th. The swelling manifestly reduced; can fasten his boot-strings a little, which he has not been able to do for many months. Urine increased from a pint to a pint and a half during the night.

Rept. haustus, (bis in die,) cum Tinct. Digitalis, m. xxx. Diet, &c., as before.

18th. Swelling still reducing; urine increased to a quart last night; says he feels quite a new man; breathing much relieved, and he is altogether easier and more comfortable.

Rept. haustus, (bis die,) cum Tinct. Digitalis, m. xxxv.

19th. Urine and swelling in *statu quo*. I increased the Tinct. Digitalis, m. x., this day, making m. xlv. in each draught. Diet &c., as before.

20th. Three pints of urine passed during the night; swelling much abated; he states that he can move about much better, and ascend the stairs with very little trouble.

Rept. haustus, (bis die,) cum Tinct. Digitalis, m. l.

21st. Fully under the influence of the digitalis. Complaints of headache, dimness of sight with muscæ volitantes, and feeling of syncope. Has passed during the night at least two quarts of urine; swelling nearly gone, scarcely any pitting; he is now able to fasten his shoes tightly. His clothes hang about him in bags to such an extent, that he is obliged for common comfort, to have them much drawn in. From his feeling so weak this day, I ordered him—

R. Sp. Ammon. Arom., Tinct. Cinchonæ Co., utr. q., dr. j.; Mist. Camphoræ, dr. x. M. Fiat haustus quintis horis sumendus. Two glasses of wine and boiled mutton.

22nd. Effects of the digitalis still remaining. Rept. haust. ut heri quintis horis sumendus. Diet &c., as yesterday.

23rd. Effects of the digitalis rapidly passing off; serous infiltration has totally gone, and as regards his general appearance, he states that he is just the same as he used to be when in perfect health. He can

mount the stairs with facility, and begins now to take daily exercise out of doors.

Rept. haustus quintis horis. Diet, &c., as usual.

24th. Great improvement. To continue as yesterday.

27th. The accounts are highly favourable.

September 3rd. My patient states that he can now do without me, feeling "*quite well*, and his heart more quiet than it has been for the last two years." I simply ordered him the following:—R. Pil. Rhei Co., gr. vj.; Pil. Scillæ, gr. iv. M. Fiat pil. ij., hora somni bis in hebdomade sumend. R. Quinina Disulph., gr. iss.; Acid. Nitro-Hydrochlor., m. v.; Tinct. Castoreæ, dr. ij.; Aquæ Distillat. dr. x. M. Fiat haustus meridie quotidie sumendus.

In conclusion, allow me to observe, that many parties may say that there is nothing new in the use of digitalis in anasarca; neither is there certainly, but I maintain that its great good (*and which has not been sufficiently observed*), is, by gradually increasing the dose every day, (*narrowly watching the patient at least three times in the 24 hours*), and carrying it to the greatest possible extent,—i. e., until muscæ volitantes, and the other symptoms of poisoning from the drug, unequivocally make their appearance. I, moreover, maintain that this mode of treatment is far preferable to the one by hydragogue cathartics, the depressing effects of which, upon a constitution previously much shattered by disease, not unfrequently produce (as I have more than once witnessed,) fatal results.

CASE OF SPASMA GLOTTIDIS.

TO THE EDITOR OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

SIR,

I am induced to send you the following case for publication, from having read in the number of the Journal which has just reached me, (No. XX., October 6th,) two similar cases of this not very common disease, (at least, as far as grown-up persons are concerned,) communicated by Dr. Wardell. The remarks of that gentleman, which accompanied his cases, are corroborated very fully by the present case, and as they must be still fresh in the memory of most of your readers, I will content myself by merely relating the case as imperfectly copied in my note book at the time.

I am, Sir,

Your obedient servant,

W. J. GORRINGE, M.R.C.S.E.,

Assistant Surgeon to the Royal Cornwall Infirmary.
October 28, 1847.

Caroline Sampson, aged 25, from the parish of Illogan, was admitted under the care of Dr. Carlyon, at the Royal Cornwall Infirmary, on the 29th of July, 1847; of middle stature, slight make, dark hair and eyes, and rather of chlorotic appearance.—*History*: States that she has been suffering from difficulty of breathing for more than twelve months; that it is getting worse daily; is not aware that she caught cold about the time of its first troubling her, but states that

it came on suddenly, accompanied with a crowing noise and a dreadful sensation of suffocation. She was bled from the arm, blistered on the chest, and medicines were administered, with only temporary relief. From this time she has never regained her usual voice, and is subject to frequent paroxysms of dyspnoea. The catamenia has been irregular for two years, and for the last five months never appeared at all.—*Present Symptoms*: Eyes suffused; countenance anxious, and expressive of great suffering; answers questions only in a low whisper; breathing performed with the greatest difficulty, and accompanied with a crowing noise, so as to be distinctly heard in the adjoining room; a sensation of tightness across the upper part of the chest; pulse small and quick; skin hot and moist; bowels confined.

Applic. Hirudines sex gutturi; et postea Cataplasma Lini. R. Calom., gr. v.; Conf. q.s. Ft. pil. hac nocte. Haust Sennæ Co. cras mane.

30th. Leeches bled freely; bowels acted twice; breathing exactly the same; complains of tenderness along the spine when pressed; urine natural.

Applic. Empl. Cantharid. gutturi. R. Tinct. Valer. Am., Tinct. Ferri Am., utr., dr. ss., ter die ex. Aq. Ment. Pip., oz. iss.

August 7th. Gone on much the same since last report; no amendment. About 6 p.m. I was called to her, the nurse stating that she was in a fit. I found her stretched at full length on the bed; her arms and legs perfectly stiff; the face crimson, and eyes riveted on the ceiling; the breathing painful in the extreme, and the croup-like noise louder than I had ever heard it before. Some cold water was dashed upon her face, and after a few minutes a deeper inspiration followed, and ended the paroxysm. As soon as she was a little tranquil, I gave her the following draught:—

R. Sp. Æth. Sulph. Co., dr. ss.; Tinct. Opii, dr. ss.; Sp. Am. Co., m. xx. M.

9th. She became more tranquil, and slept after the draught of last evening, and this morning the breathing is freer, but she complains of violent pain over the dorsal vertebrae, increased on pressure, and painful also if the integuments only are pinched. Dr. Barham saw her to-day in the absence of Dr. Carlyon, and ordered flannels, wrung from hot water, and then dipped in turpentine, to be applied to the whole length of the spine.

Auge Tinct. Ferri Ammon. ad. scr. ij.

10th. The flannels with turpentine &c. were applied until smarting and redness were produced, but with very little relief to the pain. To be repeated night and morning. Continue the mixture.

15th. Breathing much in the same state; has had no paroxysm since; noise still audible all over the room.—*Physical signs*: Stroke-sound perfectly clear over the chest, before and behind. The stethoscope detects nothing wrong more than increased respiratory murmur, but when placed over the neck a loud whistling noise is heard; the sounds of the heart are normal, but the impulse is rather too great; tenderness over the spine increased in extent and degree.

To have a cataplasm of linseed meal, made with a solution of opium, applied to the whole length of the