Vomiting was an invariable symptom, and it is probable that it would arise either from the contiguity of the disease to the origin of the pneumogastric, or to the commencing effusion into the fourth ventricle.

A singular feature in organic disease seated in the brain is, its paroxysmal form of attack, and the frequently entire freedom from pain or other symptoms during the intervals. It can only be explicable, as it appears to me, from the occasional application of an exciting cause—mental or corporeal—inducing a determination of blood to the carotid arteries.

Dr. Abercrombie gives a case of abscess, occupying one of the lobes of the cerebellum, exhibiting symptoms much resembling those of Beighton. The case terminated fatally on the fifteenth day. It has been observed by authors generally, how much less frequent are diseases of the cerebellum than those of the cerebrum.

REMARKS

ON THE

POSITION OF IMAGES IN THE EYE.

BY H. H. BROUGHTON, ESQ.

In the following observations, which are copied from my note-book, I shall endeavour to prove that objects are not represented inverted on the retina, and that muscular contraction may produce amaurosis.

First. On looking at any object through a common convex lens, and withdrawing the lens beyond its focal distance, the object is seen inverted.

Second. When within its focal distance, it is seen in its correct position.

Third. When at a point beyond the focal distance, and not yet so far as to produce inversion, the object is rendered indistinct.

Fourth. Take a bullock's eye, carefully remove the membranes from the posterior part, taking care not to disturb the vitreous humour; put it into a tube that will just contain it, without compressing it, so as to alter the diameter of the axis of vision; cut a piece of leather out in the form of a T; hold a light below so that it can only pass through the hole you have made in the leather; then hold a piece of paper close to the posterior part of the eye, and the opening will not be represented inverted, but correctly, and very small; withdraw it a little and it will be inverted and much larger.

From these facts I draw the following conclusions:—

First. That the point of vision is at A, and not at B; the point A being the focus, the rays are concentrated there.

Second. That the focal distance in the human eye varies according to the distance of the object to be looked at.

Third. That several diseases may be traced to this cause. That the focal distance varied may be at once proved by a common convex lens; get the focus, the eye being only an inch from it; withdraw the eye (say eighteen inches), and you can considerably elongate the focus by increasing the distance of the lens. That this takes place in the human eye, may be shown by the following experiment: direct any one to look at an object near to him; he contracts the corrugator muscles, thus shortening the axis of vision; desire him

to look at a distant object, the eye-ball is pushed out, and the axis lengthened. Provided you elongate it by pressing on the outer angle of your own eye, objects will become indistinct, and, I doubt not, if the distance were increased, would become inverted. Amaurosis often depends on congestion of the choroid coat, which, by its pressure, must elongate the anterior posterior axis; thus bringing the focus to the intermediate stage before inversion.

Dobcross, near Manchester, December, 1841.

TWO CASES

OF

CHRONIC LARYNGITIS,

IN ONE OF WHICH

TRACHEOTOMY WAS PERFORMED.

TO THE EDITORS OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

GENTLEMEN,—I shall feel obliged by your inserting the accompanying paper in your Journal, should you think the cases reported possess sufficient interest. I saw the patient, Mrs. Sharpe (case II), about three months ago, and she was then in good health.

I remain,
Your obedient servant,
HENRY EWEN.

Long Sutton, Dec. 18, 1841.

CASE I.—April 16, 1828.—Mr. John Drigon, aged 55, complained of great difficulty in swallowing—no swelling or redness about the fauces or upper part of the pharynx; six days previously he had a rigor, having, as he stated, taken cold; he had complained of a difficulty in swallowing for many weeks past. Mr. C— ordered a blister to the throat, some calomel and jalap, and a saline mixture. At eleven, p.m. he was suddenly taken worse, and expired apparently suffocated, before I reached his house, which was about one o'clock in the morning.

On examination after death, I found an oblong tumour extending from the right side of the epiglottis to the arytenoid cartilage of the same side; it was equal in size to a large almond, and formed apparently within the fold of the mucous membrane which extends from the epiglottis to the arytenoid cartilage; the epiglottis itself was very much thickened, and the mucous membrane on the left side, just above the rima glottidis, was oedematous, most likely the result of recent inflammation, and the immediate cause of death, the opening into the larynx being closed immediately above the rima glottidis; the mucous membrane of the pharynx was in a natural state.

CASE II.—Dec. 6, 1835.—Mrs. Sharpe, aged 55, has been suffering for the space of two years from great difficulty in breathing and swallowing, and constant uneasiness referred to the neighbourhood of the larynx; the dyspnoea has, within the last few weeks, increased to such an extent, as frequently to threaten her with suffocation, depriving her of sleep, and producing extreme emaciation; there was no evidence, on examining the chest, of the existence of disease of the heart, lungs, or great vessels. Palliative measures only had been adopted until this afternoon, when fearing that another paroxysm of dyspnoea might actually produce suffocation, I proposed the operation of tracheotomy, as the only probable chance of prolonging her existence.

Her present condition is as follows:—She is unable to continue for any length of time in the horizontal posture; respiration is attended with a loud croaking noise; her eyes have a remarkably glassy appearance; and at intervals she is attacked with severe suffocative paroxysms, which she feels confident will destroy her,

and induced her to submit to the operation, which was performed this afternoon in the following manner:—An incision, two and a-half inches long, was made in the mesial line, commencing at the lower part of the thyroid cartilage, and continued downwards; this exposed the edges of the sterno-hyoidei muscles; the dissection was cautiously continued down to the lower part of the larynx, and upper rings of the trachea, the sides of the wound being kept apart by an assistant with a blunt director; the oozing of blood, and rapid movement of the larynx and trachea in respiration, embarrassed the operator considerably; when the trachea was fairly exposed, it was fixed by the forefinger of the left hand, and an opening made into it by means of a phymosis knife held in the right hand; as soon as the opening was effected the patient experienced decided relief, and could breathe freely; but on visiting her again in the evening the external wound was closed up with coagula, and the dyspnoea as severe as before the operation; the coagulated blood was cleared away, and a small silver canula introduced.

7. She has slept well all night, and expresses herself as much better; says, "*she has not had so much breath for years*;" deglutition is now performed without any difficulty; pulse 108. In the evening some fever came on; pulse 120; expectorates bloody mucus.

Dec. 8. She has passed a comfortable night; breathes freely through the artificial opening.

Calomel, one grain;

Compound ipecac. powder, two and a half grains.

A pill every three hours.

10. Continues to breathe freely; as the calomel is irritating her bowels, and the gums are slightly affected, it is to be discontinued

Chalk mixture, one ounce;

Tincture of opium, ten drops. Every three hours.

12. She appears to breathe pretty freely through the natural passage, where the artificial opening is temporarily closed.

Hydriodate of potass, five grains;

Decoction of bark, one ounce and a half;

Compound tincture of bark, twenty drops. A draught every four hours.

From this time she rapidly recovered, without any untoward symptom.

March 15, 1836. Her general health is now as much improved as the local disease is alleviated.

REMARKS.

The immediate relief obtained as soon as the opening was made into the trachea, and the refreshing sleep which followed, strikingly evinced the propriety of the operation; the copious suppuration from the wound, together with the mild action of mercury on the system, appear to have materially lessened the swelling within the larynx, caused by the inflammatory deposition of fibrin.

should arrive, when through the remonstrances and influence of the intelligent and the humane of all ranks and of every party, such alterations in the working of it might be forced upon the legislature, as should remove the numerous and weighty causes of complaint.

We cannot, however, feel justified in allowing to pass, without comment, the instance of loss of life which the last few weeks has brought to light, and the fatal injury to health and comfort which continues to result from the incompetence, in respect to medical arrangements, which so strongly marks all the acts of the poor-law authorities. The actual amount of cases similar to the one which has so lately attracted the public attention, will probably never become known. The errors of the system, however, are equally well illustrated by one instance as by a thousand; and the history of the transactions connected with the illness of Lucy Welsh, from the first application of the unfortunate mother for assistance for her child, until the death of the girl relieved the union officers from all further importunities on her account, may be taken as an example of what can, and does, and, we fear we may add must, inevitably and frequently occur.

In the case referred to, an attempt at concealment was happily frustrated, although both the coroner and a clerical guardian of the union, in which this affair was permitted to take place, endeavoured to suppress inquiry. There is too much reason to apprehend, as regards the latter of these delinquents, that he is not the only individual among those to whom, in seeming mockery, the term guardian of the poor is applied, who has acted in a like spirit. But although the contemplation of a special case comes home with more force to the feelings, and may more strongly draw out our sympathies for the victim, it is not the occurrence of any gross instance of this description, which circumstances may conspire to make notorious, that should arrest our attention. We wish not to excite the feelings on account of the sufferings and death of the unfortunate girl, or to hold up to reprobation the neglect, real or supposed, evinced by the relieving and medical officers, the dereliction of duty of the coroner, or the cold and heartless indifference of the guardian.

The poor girl is spared the endurance of, perhaps, a protracted sickness, in the midst of the tender mercies of a union workhouse, and removed from the tribunal of poor-law authorities, to a higher, and we trust, a happier state. The other actors in this scene of wretchedness may be left to their own reflections; but we cannot allow the occasion to pass, without attempting once more to expose the manifold sufferings to which the poor are subjected under the continued exercise of this miserable system.

The test of destitution adopted as the ground of relief; the mode in which such relief is administered, whether in sickness or in health; the difficulties thrown in the way of obtaining it; the rough, and often inhuman reception which the applicants for assistance, with their spirits already broken down by distress and poverty, often borne to the verge of starvation, meet

PROVINCIAL

MEDICAL & SURGICAL JOURNAL

SATURDAY, DECEMBER 25.

It is now some time since we last drew attention to the management of the poor under the supervision of the Somerset House Commission. We had hoped not again to be called upon to contemplate the evils inflicted, under the operation of this system of administering relief to the destitute poor, until the period