going instance, but whose convalescence was tardy and imperfect. On the tenth day he was removed into the country, contrary to my advice, and, as I was subsequently informed, suffered very severely from the sequelæ of the disease.

	Noon.	Eight, p.m.
1st day of eruption	130	140
2nd „	130	128
3rd „	136	117
4th „	102	108
5th „	100	102
6th „	92	102
7th „	92	—
8th „	106	—
9th „	96	—

The respiration during the four first days was 24, though the pulse ranged from 140 to 102, the proportions which the pulse bore to the respiration being 1 to 5.83 and 1 to 4.26. It is worthy of remark that, whilst in the former case the pulse on the ninth day had fallen from 120 (the number on the first day) to 53, in this last case it was, on the same day, as high as 96.

The second case, as I believe, represents pretty faithfully the ordinary march of the pulse in febrile affections, which pass through their several stages without interruption from any unusual symptoms. The highest number is generally observed at the commencement of the attack, and in the case of the febrile exanthemata, in the period intervening between the first attack of illness and the appearance of the eruption. When the eruption is fully out upon the skin, the pulse begins to fall, and from that time continues to become less and less frequent, till the entire disappearance of the disease, and the commencement of convalescence. This point of time then is marked by the lowest frequency of the pulse, and each advance towards complete recovery and established strength is attended with an increase of frequency, until at length the pulse attains the number which is natural to it in health. This rule is illustrated by a case of convalescence from fever, which I have elsewhere* reported, in which the pulse in the recumbent posture was, on the seventeenth day, 41; on the nineteenth, 49; on the twenty-second, 60; on the twenty-fifth, 63; and on the twenty-ninth, 80. The patient was a lad, aged nineteen.

It is well worthy of remark that the respiration follows exactly an inverse order during convalescence. Thus, in the case now under consideration, whilst the pulse on successive days was 54, 60, 80, 72, and 82, the respirations were falling steadily from 30 to 26, from 26 to 23, and from 23 to 22. I believe this to be a general rule, that whilst the body is advancing from weakness to strength, the pulse rises and the respiration falls, and that the combination of an infrequent pulse with a frequent respiration is one of the signs of a state of debility.

The first case confirms the statement that mild cases of scarlatina are those which are most commonly followed by the sequelæ of the disease; and the third case illustrates a fact, equally well made out, that when the pulse maintains a high frequency

during the early stage of the disease, a lingering illness and a tardy and unsatisfactory convalescence may be looked for. The first case, as far as my experience extends (and I happen to have seen an unusual number of cases of scarlatina both in hospital and private practice), stands alone. The low frequency of the pulse at so early a stage of the disease is certainly a most unusual symptom, and one which I shall not at present attempt to explain.

The treatment adopted in the second case ought not to pass without comment. At the time that I was called in to see this case, the scarlet fever was extremely prevalent, and had proved fatal in many instances. The danger lay in the violent inflammation of the throat, and I determined, should any threatening case occur in my own practice, to apply my remedies at once to that part. Accordingly, as this case, from the rapid progress of the symptoms, and the violent inflammation of the throat itself, was calculated to excite the most serious alarm, I ordered the patient to swallow as much rough ice as he could, and kept the throat externally cooled with iced water. The other remedies administered were of the most simple kind, and could not be supposed to bear any important part in bringing about the favorable result. That this local application of cold is not likely to produce any bad effect, by preventing the full development of the disease, is shown by the fact that the eruption ran its usual course, and that the skin remained moist during the whole time that the ice was being used. I may add, that about the same time that this case was under my care, I was called in consultation to see the only one of three sisters who recovered from the disease, and whose symptoms were to the full as threatening as those of the fatal cases. She completely recovered under the early employment of the same remedy. This is but one of many local applications of cold which I have found extremely efficacious in diseases in which such a remedy is not commonly employed. There is no doubt that cold, locally applied, is among the most certain and valuable remedies which we possess.

CASE OF TUMOR IN THE RECTUM TREATED BY LIGATURE.

TO THE EDITORS OF THE PROVINCIAL MEDICAL JOURNAL.

GENTLEMEN,—The following case of tumor in the rectum was read to the Association at Exeter on the 4th ult., and as many of the members appeared to be considerably interested by its recital, I shall feel obliged by your giving it further publicity through the medium of your widely circulated Journal.

Your obedient servant,

J. C. JERRARD.

Honiton, September 9, 1842.

CASE.—Mr. Bishop, a respectable farmer, residing in the parish of Farway, near Honiton, applied to me in the beginning of August, 1841, under the following circumstances:—He had been suffering for about eighteen months from pain and a sense of weight in the region of the sacrum. During the latter half of the above-named period he was compelled to rise

* Guy's Hospital Reports, No. 8, Diurnal Variations of the Pulse.

from his bed, from ten to twenty times in a night, and his sufferings in the day time were equally severe, being never free from distressing tenesmus. At the time he applied to me he informed me that the evacuations were passed with great pain, and flattened like a piece of tape. His age is about sixty-five; constitution previously good.

August 11. I examined the rectum, and found a tumor occupying the lower portion of the gut. On passing the finger as far as it would go by the side of the tumor, it seemed to adhere by a pedicle about four or five inches up the bowel; it possessed a scirrhus hardness and a very uneven surface, and bled freely on the slightest touch. Ordered starch and laudanum injections once or twice daily, and the bowels to be kept open, if possible, by repeated doses of *confectio sennæ* and sulphur lotum.

16. The opiate injections have quieted the rectum. Ordered castor oil in half ounce doses every six hours.

17. Finding the oil had not operated, although it had been repeated several times, and had produced strong expulsive efforts, I proposed passing a ligature on the following day round the neck of the tumor, to which he assented. Ordered the oil to be continued. About the middle of the night I was sent for; on my arrival I found that, during repeated and violent strainings, the tumor had been forced out, and at the same time an enormous fecal evacuation took place. The tumor presented the following appearances:—Its bulk was about the size of an ordinary man's fist; its foot stalk about two inches in diameter; its surface ulcerated in several parts, rather deeply; its color was a dark red. I passed a piece of tape round it, and drew it tight; it occasioned great pain. I gave my patient about a deserts spoonful of tincture of opium, and a suppository, containing three grains of opium, was passed up the rectum by the side of the stalk of the tumor.

18. Saw him in the afternoon. He says his pain entirely subsided in two hours after the opiates were administered. Tumor black.

19. Has had a good night. Applied another ligature and suppository. Complains much of the ligature.

20. Says the pain occasioned by the ligature soon passed off, and he is now comfortable.

21. Since my last visit the bowels have been moved several times, and there has been some hiccup; no tenderness or tension of the abdomen, nor pain in or about the rectum. I applied another ligature, which produced severe pain, as before; gave an aperient draught with rhubarb, and ordered a suppository to be applied if the pain from the ligature should continue after the operation of the draught.

22. The draught has operated well, leaving the bowels settled; the suppository has not been required. The tumor is much shrunk, and decomposition is going on. Ordered a suppository to be used any time when in pain. There is a good deal of excoriation of the nates occasioned by the close contact of the tumor. Interposed some lint spread with chalk ointment. Pulse 70; going on well.

N.B.—The pulse has been at about 70 every day since the ligatures were first applied.

23. The bowels acted to day. On drawing down the tumor, I perceived the ligatures to be slack, and

applied another as tight as it could be drawn; it gave pain. A suppository was applied immediately.

24. The pain occasioned by the last ligature soon went off.

25. This day the tumor, on being gently drawn, came off; the bowels have acted to day freely and without any pain.

26. Is up and out of doors.

29. To day is free from pain, except a little external soreness when he sits down; there is a little purulent discharge from the anus; the bowels have been moved; the stools are deficient of bile. Ordered a blue pill two or three times a week and castor oil the following mornings.

September 1. The motions are sufficiently tinged with bile.

REMARKS.

1. The man has been perfectly well ever since, upwards of a year having elapsed since the performance of the operation.

2. The case appeared to be a hopeless one, inasmuch as the tumor could not have been removed by any cutting operation, with any prospect of success.

3. The successful termination of this case appears to be mainly, if not entirely, owing to the influence of the repeated doses of opium obviating the mischief which it seems to me more than probable would have resulted from the application of ligatures to so bulky a part and in such a situation.

A BLEEDING FAMILY.

TO THE EDITORS OF THE PROVINCIAL MEDICAL JOURNAL.

GENTLEMEN,—The following account of hæmorrhagic diathesis existing in a whole family will probably prove interesting to many of your readers. It shows, I think, the great care which it is necessary to observe in the treatment of many of the diseases of such a family, or in the performance of any operation where such a predisposition is known; as even a mere leech bite may endanger life. I need not, however, dilate on the practical deductions to be obtained from a knowledge of such a circumstance where it exists, as they must necessarily be almost self evident. I was led to make this communication from seeing one somewhat similar, but less striking, in the last Number of the "Provincial Journal," or otherwise I should have probably let it rest amongst the half forgotten facts which have been observed and then passed by amidst the distracting cares of general practice.

Mrs. W. Martin, up to the period of the birth of her first child, was a remarkably fine, handsome, and healthy young woman; had scarcely ever had any ailment requiring medical care. At the birth of her first child she had a severe and dangerous flooding, which, in spite of every means taken to prevent it, has recurred at each succeeding birth. For the first five children I attended her myself, but in her last and sixth confinement she was attended by my friend, Mr. Morey, on my account, about a year ago, when the flooding was so excessive that her life was for some time despaired of, and she has been ever since a mere shade of the woman she formerly was—being now pale, thin, attenuated, and feeble.