and actual madness, or of being able to tell where one condition of the mind ceases to exist and the other commences, he very justly observes, "The difference between eccentricity and monomanism is merely a difference of degree; and any other difference, than in extent, between monomanism and confirmed madness, it were difficult to specify." The author is a zealous advocate for the "soothing system," and concludes his remarks on the moral treatment of the insane with a spirited philippic against all madhouses and mad doctors engaged in perpetuating the barbarous atrocities of the old school. Under the head of "Mental philosophy considered as a branch of medical education," we find many excellent and judicious observations as to the *practical* utility which medical men may derive from the study of the science of mind. The truth of the following remarks will, we have no doubt, be admitted on all hands:—

"The study of mental philosophy (says Mr. Winslow) thoroughly disciplines the understanding; it also gives precision to language and thought, and induces habits of close attention and patient application of mind. The practitioner of medicine *ought* to be endued with the true spirit of a philosopher. It may be true that it does not require a very expanded or elevated tone of mind in order to enable the physician or surgeon to wield the agents of the *materia medica*; but he who conceives the art of treating disease to consist in the exhibition of medicinals, entertains an ignoble idea of the principles of his profession. Medicine ought not to be practised as a *trade*, but as a *science*."

There is a separate chapter devoted to the subject of "Diet and dietetics," which is well worth perusal, and the work closes with another—by far the most important in the volume—"On the first indications and early treatment of insanity." It would be impossible in our very limited space to enter as fully into this excellent essay as it deserves, and, therefore, recommending it to the attention of our readers, we shall conclude with the following brief quotation touching the feelings of the patient in the incipient stage of madness:—

"In the first place it is important to know that, for some period before the mental delusion becomes apparent to others, the patient himself is conscious of the approach of the afflicting malady, and often struggles against the notions and impressions which are forcing themselves upon his mind. It is at this period, when the patient is combatting between conscious infirmity of mind and actual insanity, that the physician is able, with marked utility, to administer relief. If this be allowed to pass away, and the patient sinks into a state of apathy, the prospects of recovery will be immeasurably diminished. Few, however, at this early period will confess themselves to be laboring under the premonitory signs of insanity. If any suspicions are surmised, the idea is indignantly repudiated."

In conclusion we have merely to say, that we have derived both pleasure and profit from the perusal of Mr. Winslow's useful and entertaining monograph, and we can confidently recommend it to the attention of all of our readers who take an interest in the subject of which it treats.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

November 8, 1842.

Dr. WILLIAMS, the President, in the Chair.

Case of Paralysis without Loss of Sensation, from Disease of the Cervical Medulla. By JOHN WEBSTER, M.D., &c.

As considerable attention has recently been directed to affections of the nervous system, especially since the important discoveries of Sir Charles Bell and other physiologists have thrown much light on these intricate questions, any new facts must always possess interest, even if they should not clear up some of the difficulties embarrassing the subject. With the view, therefore, of contributing to this desirable end, the author begged leave to bring before the society the following interesting case of a gentleman who had been his patient for several years:—

W. H. G., Esq., aged thirty-six. In 1836, Mr. G had a phagedenic ulcer of the left leg, which got well after some months; but it again broke out in 1839, when he had also a large chronic ulcer on the posterior pharynx of some duration, but not of a syphilitic character. He had pains in the head, with very costive bowels, during the greater part of the year 1839; in January, 1840, epileptic attacks, with very slow pulse, now supervened; and in the spring following, Mr. G. had spasmodic contractions of the lower limbs, accompanied by a sense of weakness in the back; and latterly he lost the use of his legs, and ultimately the entire control over every muscle situated lower than the neck. During the last twelve months of the patient's life, the whole body was paralysed, excepting the head, neck, and diaphragm, by which breathing was entirely carried on, and not by the muscles of the chest. However, sensation remained perfectly natural throughout the entire surface of the body; and towards the termination of the disease, the patient's feelings were even more acute than usual, and he could always tell, on the slightest touch of a bystander's finger, the exact spot to which it was applied. Severe spasmodic twitchings of the legs and arms were now more frequently noticed than before, and these were sometimes so violent as almost to throw the patient off his couch. The extremities were often very cold, but occasionally they felt also burning hot, with a sensation of excessive coldness in the epigastrium. The urine was drawn off by the catheter for many months, but latterly it passed involuntarily, as the *fæces* did likewise. All the symptoms continued unabated in violence to the last, and the patient died in July, 1842, but retaining his intellectual faculties perfect until the last.

Treatment.—Medicine had very little influence in arresting the disease, although the treatment may have relieved the severity of some of the symptoms. The remedies consisted principally of purgatives, mercury, sarsaparilla, hydriodate of potassa, strichnia, and morphia to procure sleep or allay spasm. Other means were also used, but the treatment which appeared to produce the most benefit was active purging, and the tincture of cantharides taken as a diuretic; at the same time that a copious discharge was kept up for

many months consecutively from two large issues on the nape of the neck.

Autopsy.—Nothing particular was found in the head, excepting that the arachnoid membrane over the pons varolii adhered to the parietal layer of that tissue, and about two ounces of serum were found in the ventricles; but there was no tumor or change of structure either in the brain or in the cerebellum. The thoracic and abdominal viscera were healthy, with the exception of the bladder, which was much contracted in size, thickened in its coats, whilst the omentum and some of the small intestines adhered to its surface. On opening the spinal canal, the theca, corresponding to the three or four lower cervical vertebrae, was much distended; the arachnoid cavity was filled with lymph, and there were adhesions of the membranes to the chord, which appeared firmer at the anterior than at the posterior portion, and the parts were inseparable. The chord itself was longer than usual at this particular point, felt soft and pulpy to the touch, and on being divided it was found to be in an almost diffuent state, infiltrated with serum, but of a natural color. For the extent of half an inch above this point the chord exhibited a dusky red color, but there was no difference observable betwixt the two columns, being alike softened and discolored; the parts above and below being perfectly healthy, and of a natural appearance.

ACADEMY OF MEDICINE.

November 8, 1842.

The great part of this and the preceding meetings was occupied by a discussion between M. Guérin and M. Bouvier on division of the flexor tendons of the hand.

URINARY FISTULA.

M. H. Larry communicated a very curious case of urinary fistula, which he had cured by operation. The subject of the case was a female who had been long subject to urinary fistula situate beneath the umbilicus; the disease originated in inflammation of an ovarian cyst, containing hair, which had communicated on one side with the bladder and on the other with the parietes of the abdomen. The contents of the cyst, composed of viscid and purulent matter, hairs, and calcareous concretions, had been discharged at various times from both orifices. At length a large calculus formed in the bladder, and, getting entangled in the opening of the ureter, had forced the urine to issue, almost constantly, through the fistulous orifice in the abdomen.

After considerable reflection, M. Larry determined on performing an operation founded on the principle of lithotomy, as practised above the pubes. With this object he divided the fistula freely inferiorly, exposed the cyst, extirpated a tumor to which adhered a long lock of hair and followed the latter into the bladder, where it formed the nucleus of the stone, which he removed. The immediate effects of this very formidable operation were comparatively mild, and the patient recovered perfectly.

SHEFFIELD MEDICAL SOCIETY.

Nov. 3, 1842.

Mr. OVEREND in the Chair.

SUSPECTED POISONING.

The subject announced for the evening's discussion was a paper by Dr. Favell on "certain morbid phenomena illustrative of the reflex function of nerves;" but in consequence of two gentlemen having come from a distance in the country for the purpose of laying before the society the details of some cases of suspected poisoning, Dr. F. consented to postpone the reading of his paper till some future meeting.

All the cases occurred in the members of one family, and the following are the principal facts which were detailed:—About five weeks ago, three persons, out of a family of six, residing in a village in Derbyshire, dined off dumplings made from a stone of flour which had been purchased at a neighbouring shop, and which, before being used, had stood, for at least one whole day, uncovered on a table in the house. Very soon after dinner, those who had eaten were seized with violent pain in the epigastrium, vomiting, and purging. The disturbance in the bowels, however, was very much greater in two of the cases than in the third. The remaining three of the family, who were not at dinner, came home to tea, and ate of bread made of the same flour as the dumplings. They, too, were speedily seized with similar symptoms to the three former. The whole family was in perfect health before partaking of the dumplings or bread. The surgeon who was called in at first suspected that the whole had been poisoned by mushrooms. The consecutive symptoms, however, as well as the people's own statement, soon induced him to take a very different view. After the violence of the symptoms subsided, very formidable phenomena still remained. The whole continued to droop and waste away. The inferior extremities became, in a considerable degree, paralysed; the abdomen assumed a flattened appearance; the hand was partially powerless, and there was considerable pain through the ball of the thumb. In sixteen days the father of the family, aged fifty-seven, died, and was buried, unhappily, without any post-mortem examination being performed. The rest of the patients, up to the present time, have gradually become worse. The emaciation is extreme, the prostration excessive, and the pulse remarkably rapid, beating in some about a *hundred and sixty strokes in a minute*. In some of the cases the diarrhoea still continues, whilst in others it has been succeeded by obstinate constipation. No tenderness has been discovered by a very accurate examination of the spinal column.

It is proper to remark that there have not been very often cases of sudden illness in the neighbourhood. The dumplings and the bread were cooked in iron pans, and the water which was mixed with the flour was taken from an open well, and is constantly used by the whole neighbourhood. The family deny having had anything poisonous in the house, and it appears that they are on good terms with their neighbours. In the confusion, when all were taken ill, the remnant of the stone of flour was lost sight of, and its history cannot now be traced. The whole of the baking of bread was eaten at intervals, and in small quantities at a time, by the sick family.