TWO CASES OF MORBUS CORDIS,

IN WHICH DISEASE OF THE BICUSPID VALVE WAS NOT INDICATED BY ANY ABNORMAL SOUND.

CASE I.—Anne House, a woman of congested appearance, and of ordinary muscular development; her previous general health had been good, and her habits temperate; she had never suffered from rheumatic affection. About twelve months since (whilst pregnant) she first became the subject of palpitations of the heart, aggravated by exertion. She then began to suffer from cough, attended with the expectoration of mucus, occasionally tinged by blood, and ascites followed. Her present symptoms are frequent cough, with bloody expectoration; palpitations of the heart, with pain in its region; frequent dyspnoea; her abdomen is distended by fluid; urine scanty, high colored, and albuminous.

Nov. 23. She died this day. The heart, often examined, afforded the following physical signs:—Heart's action irregular, occasionally powerful, and often intermitting, its sounds being quite unaccompanied by any abnormal sound; pulse 130, weak, intermitting, and very irregular in volume.

Sectio Cadaveris Sixteen Hours after Death.

The pericardium contained about four ounces of serum, without any adhesions.

The heart was somewhat enlarged, the right ventricle rather large, its parietes not at all thickened; the carneæ columnæ of the tricuspid valve were rather firmer than usual; the curtains were much contracted and thickened; its edges were hard, but free from cartilaginous deposit. The left auricle and ventricle were rather enlarged; the carneæ columnæ of the mitral valve were rounded and thickened; its curtains were also much contracted and thickened, forming a complete bony ring; the semilunar valves of the pulmonary artery healthy, but those of the aorta were possessed of a few slight vegetations.

The left pleural cavity contained about one ounce of serum, as also the left; the lungs were much compressed; injection of the bronchial tubes; much effusion into the abdominal cavity.

CASE II.—Maria Knight; her occupation has been that of a charwoman, and her habits as temperate as those of her class. Her previous health has been good. On admission, the symptoms present were ascites, with considerable enlargement of the liver, its acute edge being easily felt about two inches below the margins of the ribs. She labored under much dyspnoea, occasioned both by bronchial obstruction and palpitations of the heart; pulse feeble, irregular, and intermitting; heart's action disturbed, its sounds quite unaccompanied by any *bruit*. After remaining in the house a few weeks her pulse ceased to intermit, but remained permanently irregular, the stethoscopic indications being unaltered. She became the subject of a second attack of pulmonary obstruction, of which she died.

Sectio Cadaveris.

The heart was much enlarged, firm, and blunt at the apex. The left ventricle had its muscular wall thickened and more firm; its cavity was also much enlarged. The carneæ columnæ of the mitral valve were thickened, and appeared of a rounded form, whilst the curtain itself was of nearly double its

natural thickness, and much more opaque. The valves and lining membrane of the aorta were but very slightly thickened. The right auricle of the heart was considerably distended by coagulum; its cavity was much more capacious, although its muscular wall was pretty natural. The carneæ columnæ of the tricuspid valve appeared thicker and more fleshy, and the curtain slightly opaque. The semilunar valves of the pulmonary artery were pretty healthy.

There was effusion into the chest and abdomen.

The lungs were oedematous, and rounded by emphysema.

REMARKS.

In the first of the preceding cases the mitral valve was in a very advanced stage of disease, so much so, indeed, as to interfere with, and rendered most imperfect, the performance of its function. No *bruit* was, however, present. The second case very well illustrates the incipient form of disease, in which the valve, although thickened and with shortened columns, was yet capable of performing its office. This condition was also unaccompanied by any abnormal sound. It is still a *vezata quæstio* amongst authorities of the present day whether disease of the bicuspid valve can give rise to the production of a *bruit*. The great majority of opinions favor its existence, and attach importance to it as a diagnostic sign. The present cases, with some others that might be adduced, oppose this view, and are more particularly valuable as demonstrating the non-existence of the *bruit* in the more early, as well as in the most advanced, stage of disease.

CASE OF DIFFICULT PARTURITION—TWINS.

TO THE EDITORS OF THE PROVINCIAL MEDICAL JOURNAL.

GENTLEMEN, — Some years ago I read in the "Medico-Chirurgical Review (No. 2, Sept., 1824)," an account of "Mr. Allen's Rare Case," as originally stated in the Medico-Chirurgical Transactions. Since then I have had a case very similar in the presentation of both the children. My patient was a married woman, twenty-two years old: her first labor. See lived at Burlington, about three miles from my house. Soon after I saw her the liquor amnii escaped, and the feet of a child presented, which, with the body and arms, were brought down; but in trying to get my fore finger into the mouth of the child, I found the apex of a head in the pelvis, preventing any further delivery; so far, not doubting but it must be the head of another child, I applied the forceps, and by gradual traction a healthy child was born, *without laceration* of the perineum, when instantly the head of the first presenting child followed. Both were alive—small children, and boys. They appeared to do well for a fortnight, when one died suddenly; the other is, I believe, now alive. The woman very soon recovered.

Had I been assured the children were dead I should have acted in a similar way, as, by using the forceps, if the head had separated, there would have been room for the head of the *first* child to be delivered by such means as appeared best, or expelled; and then the

body of the second child could be readily expelled by natural pains, or brought away by turning.

Of course, under such circumstances, great anxiety must be felt to get the head or heads delivered, as there always was a difficulty, if not an impossibility, of adapting a head left in the uterus to the form of the pelvis.

I remain, Gentlemen,

Yours respectfully,

JOHN FLETCHER, M.R.C.S.L.

Sheffield, August, 1843.

PROVINCIAL MEDICAL JOURNAL

SATURDAY, AUGUST 12, 1843.

The advantages resulting from combination of efforts are at this day so well appreciated, that it needs no labored argument to point them out. The utility also of societies and associations, for specific objects, has long been felt, and various institutions for the promotion and cultivation of general science, or the advancement of particular branches of scientific inquiry, of the arts, and of the social, political, and religious relations of mankind, have from time to time sprung up. Most of these, however, were, until of late years, confined in their operations, and, from the difficulties of communication, for the most part limited in their extent. The facilities afforded by the ready means of intercourse, now available almost throughout the country, have greatly altered the character of such institutions and associations, which, not many years back, were either confined to metropolitan and some few of the large manufacturing towns, and consequently regarded only the interests of the places whence they derived their origin, and to which they were necessarily confined, or otherwise were of such limited extent as to be possessed neither of influence nor extended utility, are now formed, to embrace within their sphere of operation nearly the whole country, and become invested with national importance.

The most striking instance of the change in the character of institutions of this kind is, perhaps, that afforded by the Provincial Medical and Surgical Association. Established eleven years ago, in one of the county towns of the Midland district, which, though central in its situation, and otherwise favorably circumstanced, can by no means vie, either in numerical extent of population or in wealth and importance, with the capitals of the manufacturing and commercial districts, this Association has steadily progressed, until it numbers upwards of 1600 members from every part of the kingdom, and includes among these many—we believe we may say a large majority—of the most distinguished medical practitioners of which the provinces can boast. The general

meetings of this society have now been held successively at Worcester, Bristol, Birmingham, Oxford, Manchester, Cheltenham, Bath, Liverpool, Southampton, York, Exeter, and Leeds, and the expression of opinion upon the several objects contemplated by the Association, elicited at each of these meetings, must be held to represent the views of the medical profession resident in these populous and important localities, and the country around them. The moral force of the Association is not merely derived, therefore, from the numerical amount of its members, but must be estimated also by the extent of country over which its operations are felt; and the opinions and influences of 1600 practitioners, scattered throughout the whole country, yet united into one large and effective body, are far more worthy of attention, and ought to have much greater weight, than were they merely expressive of the views of an equal number congregated into one place, or presided over by a small self-elected governing body, which never does, and never can, come into contact with the great mass of those who are subjected, for the most part unwillingly, to its rule.

A distinguishing feature of the proceedings of the Provincial Association, from its very commencement, is the explicit and clear enunciation of its principles, and the moderation and justice of its requirements. In no one instance has the Association had to retrace its steps. The resolutions of one meeting, while they have been consistent with those of the meeting which has preceded it, have been, in like manner confirmed and extended by that which has followed; and though time and experience have had their customary effect in the elucidation of truth, and in clearing up doubts, and removing the obscurities which, in the first instance, beset the difficult and important questions which have from time to time engaged attention, still in no instance has it been found necessary to depart from principles laid down and adopted at the public meetings, or to call in question the proceedings of the general council founded thereupon.

This fact is, perhaps, without parallel in the history of any like constituted assembly, whether scientific, social, political, or religious, and ought strongly to dispose those in power to listen with respect to any application coming from such a body of men. It betokens no ordinary judgment in those who have taken the lead in the management of the affairs of the society, whether in the council or at the general meetings, and a degree of moderation and intelligence in the members at large highly creditable to the medical profession, and which we might look for in vain, under similar circumstances, in the recorded proceedings of any other class of the community.

Let us take, for instance, the subject of medical reform, confessedly the most difficult with which the