Dr. Budd's objection to it be founded on practice, it may bear the same explanation I have given of his objection to bleeding,—that his cases had passed the stage when depletion could be borne; and in judging the value of an opinion on the use of mercury some hundred years ago, we must take into consideration the modes of employing it now, and then. A knowledge of what mercury can do when properly used, and what it will do when improperly used, is amongst the best proofs of our improvement in medical science—it is at once the most remedial and destructive agent we can employ, because its effects are most definite; and if Kramer saw it used in land scurvy in anything after the fashion it was used amongst us some fifty years ago, it is no very great wonder he should have reprobated it in a disease so rapidly tending to depression.

But there is one remedy which has met with nearly universal approbation—citric acid or lemon juice; it would appear to have been used by the medical officers at the Cape, in conjunction with their antiphlogistic plan; and all parties seem to consider, that whatever may be the proximate cause of the symptoms of land scurvy, and consequently the indications of treatment to be derived from diathesis, the primary cause is the want of some principle in the animal economy which an organic acid supplies, and that none is equal to the citric acid. In the cases which came under my own treatment, but which were not aggravated in their symptoms, I found the citric acid of commerce sufficient. Mr. Harries, of this city, informs me that he did also, though he continued it for a long time it would seem before it fully effected a cure. But some of my correspondents employed the fresh lemon. Mr. Gore ordered fresh lemons and green vegetables for the cases at our Union House.

Mr. Highmore, of Bradford, first treated the disease in the Bradford Union House by a total change of diet, giving fresh vegetables, and citric and mineral acids, quinine and other tonics, *without the slightest success*. He then obtained a supply of lime juice, which was given to all the children, healthy and diseased, two ounces to each daily, with sugar and water. After the first few days from adopting this plan, no fresh case occurred, and it was sufficient to cure those already ill, some of whom were in a most pitiable condition, the spongy bleeding gums overlapping the teeth, and the cheeks, in two cases, deeply ulcerated. But other acids were employed with success.

Mr. Foster, the surgeon to the Taunton Union House, informed me that he made the patients there drink rough cider, and eat plenty of fresh vegetables, and they got well. My brother, (Mr. C. Barrett,) in the Tisbury Union, employed sulphuric acid, vegetable diet, and tonics, with speedy relief. Dr. Lindoe, physician to the Walcot Dispensary, met with about a dozen cases which he recognized as land scurvy, but he states that he found more than a usual prevalence of purpura

hæmorrhagica. His treatment consisted in saline diaphoretics, with acidulated drinks, followed by vegetable tonics and diluted mineral acids. Dr. Samuel Edwards, of London, late physician to the same dispensary, writes me that he treated his cases, which were not aggravated ones, on the tonic plan, vegetable bitters, with mineral and vegetable acids, but, above all, the "Charity Ball" tickets, by which means he was able to supply good meat soup, meat, and sometimes vegetables. Mr. Hutchins, surgeon to the Keynsham Union House, where the disease appeared, informs me that medicines were not generally well borne. He used alteratives, slight purgative, tonics, with light nutritive diet and stimulants. His cases were of slight character.

(To be continued.)

CASE OF EMPYEMA,

IN WHICH NINETEEN PINTS AND A HALF OF PUS WERE REMOVED BY AN OPENING MADE INTO THE CAVITY OF THE CHEST, WITH REMARKS.

By JOHN TUCKER, Esq., Surgeon to the Exeter Dispensary.

(Read to the Devon and Exeter Pathological Society, at the Exeter Dispensary, February 2nd, 1849.)

The attention of medical practitioners having been of late frequently called to empyema and paracentesis thoracis in several of the medical publications, induces me to relate to the members of this Society a case which some time since occurred in my practice. There are many remarkable circumstances with which it is connected, so that I venture to anticipate a brief report of it will not be considered as uninteresting by the majority now assembled.

On the 30th of June, 1837, James Tucket, aged 26, of Ashton, in this county, consulted me. A few days previously he returned from the Island of Jamaica, where he had spent the last six years in the capacity of an overseer, which in the West Indies is understood as the manager of an estate. I had known him well before he left England, when he was in rude health and had never shown any predisposition to disease. The change now, however, which had taken place in his constitution, forcibly struck me, for his general appearance was that of a person in the last stage of phthisis, and so were his symptoms, for he had a most harassing cough, great emaciation, pulse 130, œdematous state of the legs, and expectorating daily from a pint to a pint and a half of purulent matter.

The history he gave me of his case was as follows:—That for more than twelve months he had been in an ailing state, suffering from boils in various parts of his body, which were relieved by occasional doses of blue pill and laxative medicine. These disappearing, slight pains were often felt in the left side just below the ribs, and which increased when he coughed or laughed.

He was advised to wear a belt tightly buckled around him, and to rub a liniment composed of camphor, hartshorn, and turpentine, with a little oil. This gave him relief so that he was able to follow his occupation on horseback. On August 3rd, 1836, was on horseback during the greater part of the day; went to bed at nine o'clock fatigued, but quite free from pain, and fell asleep. At 12 o'clock he awoke with violent pain in the left side just below the ribs, and was unable to lay in the horizontal position. So great were his sufferings, that at break of day he sent for the medical attendant of the estate. He was bled to faintness, and had given him some calomel and antimony with purgative medicine. For the time he was much relieved, but as there were frequent spasms in the side, and tenderness on pressure. a large blister was applied and kept open. Every attention was paid to diet and to the action of the bowels. On the 20th, the pain in the left hypochondriac region again returned with great uneasiness about the blade-bone and up the neck, accompanied with difficulty of breathing, evacuations quite white. Was again bled largely and a good-sized blister applied over the affected part. Several blisters were had recourse to and he took a good deal of calomel and laxative medicine. Was much relieved and remained in a convalescent state till about the beginning of April, 1837. At this time he discovered a tumour in the left side, under the ribs, which increased to the size of a foot-ball, very hard, and if pressed caused him a great difficulty of breathing. Severe rigors came on, and he was at times feverish, lost his appetite, became thinner and legs much swollen. Was advised to visit his native country, and on the 11th of May went on board ship for that purpose. On the fourth day a gale of wind sprung up, which caused considerable sea-sickness, and during the act of vomiting the tumour in the left side suddenly left him. This was followed by the greatest difficulty in breathing, almost amounting to suffocation, was unable to lay down in his hammock, and the only relief he could find was in an erect posture. In this state he remained until the 18th of May, when a very large expectoration took place on a sudden, and which gave him considerable ease, and he was able to respire more freely. At this period the cough become most harrassing, in fact it never ceased, caused by the constant and great expectoration. He came on shore June 21st, and made the best of his way into Devonshire.

June 30th. His father brought him to my house, and in the state already described. I thought it right to examine the chest first by measurement, with a tape, just below each nipple. The entire was forty-one inches and a half. On the right side I found it nineteen inches; on the left, twenty-three and a half, with considerable more rotundity, and the intercostal spaces were much wider apart. Secondly, with the stethoscope. In neither region of the left side could any sound be heard, and by percussion every part was dull, but on the right the respiration was generally audible, and what Laennec has called puerile. The position of the heart was towards the right side, and in no part of the left could its pulsations be felt. There was no doubt in my mind as to the nature of the case,—viz., that a large collection of fluid

existed in the chest, and the only remedy which I held out to him was its removal by an operation. This I explained to him and his father, but at the same time advising that some other medical practitioner of eminence should see him with me in consultation. Dr. Macgowan was fixed on, who, after making every enquiry, and minutely examining the chest, came to the same conclusion as I had. Several of my medical friends subsequently saw the patient, and we all agreed. The poor fellow could not make up his mind to submit, and all that was done was to sooth and allay his symptoms with large doses of hyoscyamus, and the different preparations of opium. In this state he went on, occasionally coming to Exeter, but evidently getting weaker and more emaciated, until September 20th, when he took lodgings, having resolved to submit to anything I suggested, for his distress was such, to use his own expression, that he preferred death.

On the 30th of September I performed the operation by an incision between the seventh and eighth ribs, an inch in length, in the presence of Dr. Macgowan, and my pupils, Messrs. Macdougald and Roberts. The pleura was astonishingly thickened, and on being punctured, gave exit to five measured pints of purulent and most offensive matter. Becoming very faint, we placed him in the horizontal position, and administered a little wine. The relief he experienced was very remarkable, for his cough immediately ceased, and he was enabled to lie on his back. In the evening I visited him again, and found him very comfortable and grateful for the relief which had been afforded him. I forgot to mention that in the opening a pledget of lint was put when the faintness took place. As we were quite aware that a large quantity of matter still remained, I thought proper to place him on the left side, and remove the lint; about four pints and a half of pus was evacuated. Previous to the operation the pulse was never under 110, but after, and at this visit, I found it at about 80. The dyspnoea was now quite gone, so that he could lie on his back without distress, which he had not been able for at least twelve months.

October 1st. Has slept many hours, and had no fever. Removed the plug, when about two pints flowed from the wound.

4th. Complaints of oppression over the chest. Took away the lint, but nothing escaped.

6th. In great distress; pulse 120; and unable to lie on his back. Passed a common-sized trocar into the wound, and removed two pints and a half of the same kind of pus. He passed a tranquil night, and was again able to lay with comfort on his back.

7th. Considerable derangement of the digestive organs; vomiting and purging, of a green bilious matter; cough increased, and expectoration of a yellowish green fluid. This caused great exhaustion; however he rallied by the 11th, and left Exeter for his own home, which is about eight miles, on the 13th.

I visited him on the 16th, and found all his symptoms had returned, and the legs again becoming oedematous.

On the 18th, finding him in great distress, I advised another puncture to be made; this I did between the ninth and tenth ribs, about six inches from the spine, with a

middle-sized trocar, when five pints and three quarters of most offensive matter rapidly escaped. Now I determined on keeping in some hollow tube, and I passed about two inches of an elastic-gum through the canula, which I withdrew, leaving the former, plugged with a bit of wood. Previous to my leaving him I thought proper to substitute the canula of an hydrocele trocar, which I had prepared, with four holes at the shoulder, in order, with tape, to tie round the body: into the opening I also passed a plug, and instructed him how to use it, if any distress occurred. From day to day he did so, and at each time three or four ounces escaped.

On the 21st I again visited him; found him in excellent spirits; little cough, and was not at all distressed when laying on his back.

On the 28th I again saw him, and was surprised to see the alteration which had taken place. He was down stairs, and felt quite convinced he should recover. Appetite good; little cough; sleeps well; pulse 75; is gaining flesh; takes a good deal of raw milk; no cedema of the extremities. Removes the plug from the canula about every third day, and evacuates two or three tablespoonfuls of fluid.

On the 10th of November was enabled to ride to Exeter and back again in a spring market cart. Still continues to mend, and is looking healthy.

For several months I did not see him, but heard that he still kept the canula in his side, and was very well.

In September, 1838, was so very much recovered as to enjoy the sports of the field; he was cautioned, however, to be careful in every respect. The winter he passed well, had regained his strength, still wearing the canula, and occasionally taking out the plug.

In the spring of 1839 was so well as to return to the West Indies, since which he has married, and is the father of two children. A few months since he wrote me a grateful letter, stating his perfect restoration, that he was the manager of a large estate, and often tired three horses a day. Up to the present period he still wore a canula, and as it caused no inconvenience to him, intended to do so. Of so corrosive a nature was the secreted matter, he informed me, that besides the instrument I gave him, he has been obliged to purchase four since. In my reply to him, I advised a canula made of platina; whether he has procured one of this metal I am unable to say.

Thus favourably has this case terminated; and when all the circumstances are borne in mind, little doubt will exist but that originally a large abscess formed in the liver, which made its way through the diaphragm, and ultimately into one of the bronchi. Instances of the kind are not very rare of patients having survived; but my firm belief of this young man is, that had not the operation and subsequent practice been adopted, his life would not have been spared.

CLINICAL ILLUSTRATIONS.

ON CORRODING ULCER OF THE UTERUS: CASE AND REMARKS.

By EDWARD BALLARD, M.D., of Leamington,
Late Senior Physician to the St. Pancras Royal General Dispensary, and Medical Tutor in University College, London.

The difference of opinion which exists among medical authorities respecting the nature of that disease of the uterus which passes under the name of corroding ulcer, induces me to furnish the narrative of a case which occurred in my own practice. The publication of it was further suggested to me by the appearance, in the first number of the Journal for the present year, of a clinical lecture on the subject, by my friend Dr. Heaton. I may premise respecting the rarity of the affection, that it was the only case which occurred to me during the five years that I was attached to a large public dispensary, although numerous cases of cancer, and simple ulceration of the womb, presented themselves for treatment.

CASE.

Frequent Miscarriages; trifling Hæmaturia; sudden Vomiting, with Pain in Loins, &c.—Vaginal Discharge; Ulcer of Cervix Uteri; Cystitis; Vaginitis; Discharge of Urine by Vagina; Death.—Post-mortem examination:—Corroding Ulcer of Uterus; Communication between Vagina and Bladder; Cancerous Deposit, &c.; Ovarian Cyst; Ulcers, &c., of Gullet, &c.

A. G., aged 50 years, residing in a tolerably healthy part of Somers Town, but six years before had been living on the banks of the Regent's Canal, where fogs and mists were almost continual, except in very fine weather; of lymphatic temperament and cheerful disposition. No hereditary taint to be traced. She placed herself under my care, at the St. Pancras Dispensary, on May 18th, 1846. The history taken at that time was as follows:—So far as can be ascertained, her habits have been temperate. She has, during the last few years, undergone some amount of privation, but has always been adequately clothed. She has been married twenty-five years, and her husband is living. Her first child was born fourteen months after her marriage. The labour was protracted over three days and nights, but she was ultimately delivered without instruments. She then suffered one or two miscarriages, and in three years after had another child. This labour was favourable, but was followed for three months by a thick, yellow, and exhausting vaginal discharge. Since then she has had four other miscarriages, at early periods of pregnancy, not accompanied by much flooding; the last was four years ago. The catamenia commenced rather late,—namely, between eighteen and nineteen years of age; for the last eight or nine years have occurred at more prolonged periods than formerly, and although latterly clotty, have not become more abundant.

With the exception of slight catarrhal affection, her