CASES OF POISONING.

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Read at the Anniversary Meeting of the Suffolk Branch.

POISONING BY TARTAR EMETIC: RECOVERY.

AN individual having suspected a servant girl, aged 13, who waited upon him, of purloining his sugar, was induced, at the recommendation of a druggist, and with a view to detect and check the propensity, to mix tartar emetic with some powdered white sugar, contained in a basin. The girl, as was anticipated, partook of a large portion of this mixture, swallowing not less than two scruples of the emetic tartar. She was immediately seized with violent vomiting and profuse hypercatharsis, with collapse. In addition to the exhibition of the usual antidotes, the hot-air cholera basket was found of signal service in restoring warmth, and relieving the extreme prostration. The symptoms continuing, in a less aggravated form, until the eighth day after the poison had been taken, I was requested by the medical gentleman in attendance to see her in conjunction with himself. On our visit we found her labouring under cerebral effusion, with intense gastro-intestinal irritation.

The symptoms were,—utter prostration, muttering delirium, and partial unconsciousness. Pupils dilated and immobile; tongue red, papillæ very prominent. She had complained of constriction, with burning sensation in the throat, since taking the poison. Constant vomiting; had not passed urine for twenty-four hours; bladder not distended; bowels now confined; feet very cold; left leg contracted upon the thigh; has suffered much from cramp; arms contracted; convulsive action of facial muscles; pulse small and slow; great thirst, but all fluids instantaneously vomited. A blister had already been applied to the epigastrium. The head was directed to be shaved and the scalp blistered, and afterwards dressed with the strong mercurial ointment. Two grains of calomel and a quarter of a grain of opium were directed to be given every four hours, and a turpentine enema administered immediately.

The vomiting of all ingesta continuing, another blister was applied to the epigastrium, and the patient supported solely by injections of beef-tea; a teaspoonful of cold water, which was retained upon the stomach, being allowed at intervals, to assuage the thirst, which was very distressing.

Upon the supervention of ptyalism the cerebral symptoms subsided, and the patient gradually but very slowly recovered.

Remarks.—Cases of poisoning by tartar emetic are not of very common occurrence. The quantity swallowed by this patient was stated to have been not less than two scruples. Dr. Christison, in his work on poisons, mentions three cases. In one a scruple of tartar emetic was taken by mistake for cream of tartar. The symptoms were very severe, the patient remaining in an apparently dying state for six hours, when he recovered gradually under the use of cinchona and opium. Another case

took forty grains, and although he vomited soon after taking it, the dose proved fatal at the expiration of five days, the patient dying in a state of furious delirium, with convulsions. A third case is referred to by the same author, in which the patient suffered very severely from so small a dose as six grains. The exact quantity of tartar emetic required to destroy an adult is unknown, the result depending much upon the amount of vomiting and purging that has been excited. The smallest dose upon record which proved fatal is ten grains, administered to two children of the respective ages of five and three years. These cases, with the *post-mortem* examinations, were detailed in the *Lancet*, by Mr. Hartley; the one child dying in eight, the other in thirteen hours after swallowing the dose.

Had not the case under consideration been treated actively and judiciously at the onset, there is little doubt but that the quantity of the poison taken would have proved fatal. The symptoms throughout were particularly well marked. Suspension of the secretion of urine is not mentioned by writers on toxicology as belonging to the symptoms of poisoning by tartar emetic, and in this instance it probably depended upon the disordered condition of the brain and its circulation.

In a medico-legal point of view, had the case terminated fatally, it would have been attended with painful interest in reference to the party by whom the dangerously-practical experiment was instituted.

POISONING BY CORROSIVE SUBLIMATE; DEATH IN FOUR DAYS.

A little boy, aged ten years, in order to avoid punishment at school, drank a portion of the contents of a bottle labelled "Bug poison," containing four ounces of the bichloride of mercury to the pint of water.

The history of the case given at the time stated, that he returned from school on the previous evening, having a dread of punishment on the following day; that he was called, as usual, at seven in the morning, in perfect health; dressed, went down stairs, drank the poison, and then confessed to the servant what he had done. The exact quantity of corrosive sublimate that was swallowed could not be ascertained, but it was surmised that he had not taken less than from one to two scruples of that poison. Whites of eggs were freely and instantaneously administered, but vomiting and purging of bloody matter immediately supervened. In twenty minutes after swallowing the mixture he passed bloody urine, from which time that secretion became totally suspended. Complete collapse now supervened, the body becoming cold and purple, and no pulsation could be detected at the wrists. I saw him in the evening of the second day after taking the poison; reaction had taken place, the tongue was coated and very morbidly red, and he was unable to bear the slightest pressure, either over the epigastrium or abdomen generally. No urine had been secreted. Pulse slow and very feeble. Leeches and a blister were ordered to the abdomen, and the free exhibition of mucilaginous drinks internally. He never, however,

rallied in the slightest degree. Purging of mucus, with constant hiccups and no secretion of urine, continued, but the intellect kept clear till the last, when death terminated the poor boy's sufferings by a single convulsive sigh.

Remarks.—The chief points of interest in this case are the rapidity with which some of the symptoms followed the swallowing of the poison, the absence of others which commonly precede death from this cause, and the period which elapsed between the taking the poison and its fatal result.

It was quite clear, from the previous history of the case, that the intention of the boy (ignorant as he was of the effects of this salt) was solely to produce a sufficient amount of indisposition to keep him from school. That he must have taken a very large dose of the poison is equally evident, from the severe vomiting and purging of bloody matter, and the hæmaturia which so immediately followed the act.

The absence of the severe constriction and burning heat of the throat which are so generally complained of after poisoning by corrosive sublimate, together with the profuse pyalism, which so frequently supervenes, are also remarkable, although the symptoms are by no means uniform, depending of course upon the quantity of the poison, the amount of vomiting and purging, and also upon the celerity with which the proper antidotes have been administered.

Suppression of urine is not an uncommon symptom of poisoning by corrosive sublimate, and when it obtains it is generally of grave import.

According to Dr. Christison the ordinary duration of fatal cases is from twenty-four to thirty-six hours, but cases on record prove that death may take place much sooner or much later than this. In reference to the quantity of the poison necessary to destroy life, it is stated by Taylor, that under favourable circumstances, from three to five grains would be sufficient to cause death in the adult, although by the timely exhibition of remedies and free vomiting, recovery has followed the exhibition of a dose of even forty grains. The poison in this case was taken under the most favourable circumstances for acting speedily, *i. e.*, on an empty stomach, and the suspension of the fatal event can be alone attributed to the profuse vomiting and proper administration of the whites of eggs.

CASE OF GANGRENE OF THE LUNG,

By J. GURDEN, Esq., BOXFORD.

Read at the Anniversary Meeting of the Suffolk Branch,

By J. GROWSE, Esq.

THE following notes upon a case of sphacelus of the lung, coming under my care between two and three years since, I have put down from memory, not having any notes of the case:—

On the first of January, 1848, I was requested to

visit Mr. C., a person of very regular and temperate habits, having a well-developed chest, and of a nervous bilious temperament, and who had enjoyed good health, with the exception of a slight attack of rheumatism some years since. He now complained of having a very unpleasant taste in his mouth, and that he felt himself depressed and weaker than usual, but kept about and attended to his business. I ordered him blue pill and Dover's powder at bed-time, and a compound senna draught the following morning, when I found him still complaining of the taste, which he thought arose from a slight soreness about the throat, which was inflamed with enlargement of the tonsils. He was directed to have a saline purgative night and morning, and an astringent gargle for the throat. This he continued for several days, when he complained of having a slight cough, but without any expectoration, the unpleasant taste becoming more offensive, and, which could now be perceived by those around him, he was losing strength, getting thin, and becoming very irritable; not able to sleep without anodynes, and complaining of much pain in his head, with slight delirium of a maniacal character at bed-time. About this time (ten or twelve days from my being called in) the cough became suddenly violent, coming on in violent spasmodic fits, with slight expectoration, very offensive. He had pain and tenderness about the larynx, and from the nature of the cough I was inclined to think it was the seat of disease, being unable at this time to detect any disease of the chest. The treatment consisted of blisters to the throat and chest, alteratives combined with anodynes at bed-time, and an expectorant mixture during the day. The disease continued to gain ground, the expectoration to increase, and a mucous râle could now be heard in the larger air tubes.

On the 8th of January I met Drs. Durrant and Scrimshire in consultation. His cough was still violent, with much offensive expectoration; emaciation increasing; pulse varying, from 100 to 120 in the recumbent position; no night sweats. Dr. Durrant, in examining the chest, found a general dullness, as if the lungs were congested, and thought he could hear a metallic clink upon percussion in the lower part of the left mammary region, the vesicular murmur not being very audible in any part of the chest. He was ordered an inhalation of creosote, with Hydrarg. cum Cretâ, gr. iv., night and morning, and the following mixture three times a-day:—R. Potas. Bicarb., dr. j.; Potas. Nitr., dr. ss.; Tinct. Hyoscy., dr. j.; Mist. Camph., oz. vj., a fourth part a dose. A blister to the chest. The medicines he continued, with occasional anodynes at bed-time, to the 2nd of February, without any relief, the cough increasing, and the expectoration amounting to thirty or forty ounces in the twenty-four hours; the room during coughing was scarcely bearable, from the putrid state of the breathing. He now had a mixture of quinine, with dilute sulphuric acid, and tincture of hyoscyamus with anodyne at bed-time; these he continued, with a liberal diet, till he was seen by Dr. Probart, of Bury, who found him extremely weak,