10. Appetite good; some wandering pains in the abdomen; pulse 100; respiration 32; passed one stool.

On the 11th, eight leeches were applied over the region of the umbilicus. On the 12th, a purgative enema was ordered, and continued daily. On the 16th, the child was placed in a warm bath, and was immediately seized with delirium, but no convulsions occurred; he was taken out of the bath, had a purgative enema, and ordered to take the sulphuric lemonade. There was now hardly any trace of trembling.

On the 24th the skin was natural; pulse 88; vomited once; pain of abdomen not increased on pressure. To have an ounce of castor oil.

25. The oil was repeated to-day, and brought away a quantity of faecal matter; the abdominal pain was now much relieved; the purgatives were continued, and the patient left the hospital, completely cured, on the 10th of May.

REMARKS.

The three cases which I have related above are examples of an affection which has not, so far as I know, been noticed by any writer on the diseases of children. It is evidently one of those purely nervous disorders which often pass away as rapidly as they have appeared, and leave behind no trace of organic lesion to account for the variety or intensity of the symptoms. The chief characteristic of the disease is an equable and rapid oscillation of the limbs, in the line of flexion and extension. It bears some resemblance to chorea, from which it is distinguished by the peculiar oscillatory movement, very different from the irregular and involuntary motions observable in the latter named affection. The causes of nervous tremor in the adult are various; in the child the exciting causes seem to be the same, so far, at least, as we can infer from the few cases on record. In the three examples which I have related, the causes of the disease were grief, obstruction of the menstrual function, and the action of lead on the system.

The symptoms of nervous tremor may be readily deduced from the cases, and I shall not, therefore, dwell on them further than to notice the pains in the limbs which occurred in two cases of the three. The absence of headache—of convulsive movements—of contraction of the limbs—and of other lesions of the motor and sensitive powers, will aid us in determining the true nature of the disease. Its treatment must in most cases depend on the nature of the affection with which the tremor is associated.

Thus in the case of Guilbert the trembling clearly depended on the deleterious action of lead, and was speedily removed by active purging.

In Germain's case it seems to have been connected with the establishment of the catamenial discharge, and in the case of Boulet it was excited by mental emotion—the fruitful source of chorea and other nervous disorders.

58, Margaret-street, Feb. 16, 1844.

TABULAR REPORT,
WITH
SOME OBSERVATIONS,
OF
185 CASES OF DISEASE,
OCCURRING AT THE
MANCHESTER UNION HOSPITAL,
During the Year ending the 31st Dec., 1843.

By J. BLACK, M.D.,

Physician to the Manchester Union Hospital, Lecturer on
Forensic Medicine, &c. &c.

In submitting the following Report to your readers, and in order that the statistics of the diseases therein enumerated may be better understood, it may be proper to state that the Union Hospital is appropriated for the reception of the destitute sick and hurt (with the exception of those afflicted with sudden severe accidents and injuries) that occur in the poor-law union of Manchester. This union district contains, by the last census, a population of 192,403 inhabitants; and besides the out-door paupers, the workhouse has, on the lowest average, about 1,200 inmates. The hospital beds allotted for the sick and hurt are at least 250, divided into twelve wards of unequal sizes, which are nearly equally apportioned between the medical and surgical cases, the whole of which are under the superintendence of three honorary physicians and three honorary surgeons, besides a resident surgeon and an apothecary.

The diseases and ailments occurring among such an extensive population—a great majority of which are of the laboring and destitute classes—will naturally be supposed to be many and frequent; and it may also be inferred that their diseases will have a somewhat different character, as to chronicity and fatality, from those presenting themselves at institutions supported, independently, either from private endowment or public subscription.

Though the tables only give the list of diseases and their results for one year, of a third of the patients in the medical wards, it will serve to show their general character and mortality as they occur among those classes of our fellow-creatures who become the unfortunate objects of such a well-provided refuge for them in the day of sickness or in the hour of death.

Numerical Table of 185 Cases of Diseases, that occurred at the Manchester Union Hospital for the Year ending the 31st December, 1843.

	Males.	Females.
Remaining under treatment		
Jan 1, 1843	— 6	— 10
Admitted during the year	— 92	— 77
Cured	44 —	37 —
Relieved	7 —	6 —
Removed by friends	— —	4 —
Removed to surgical ward	4 —	— —
Removed to fever ward	2 —	1 —
Passed to their parishes	1 —	2 —
Dead	21 —	20 —
Remaining in Hospital Dec. 31, 1843.	19 —	17 —
Total	98 93	87 87

Table of the Diseases, and their Results.

Name of Disease.	Total Cases.	Males.		Females.	
		Cured, Discharged, or remaining in Hospital.	Died.	Cured, discharged, or remaining in Hospital.	Died.
Pulmonary emphysema	3	1	1	1	
Phthisis	25	4	8	3	10
Bronchitis	14	6	1	3	4
Pneumonia and pleuritis	4	2	2		
Catarrhus (acute) and influenza	17	7		10	
Cynanche	4	1		3	
— syphilitica	1			1	
Pertussis	2			2	
Morbus cordis and pericarditis	2		1	1	
Induration of left lung (chronic)	1			1	
Gastro-enteritis	19	8	1	10	
Enteritis	1		1		
Colica	3	2		1	
Hepatorrhœa	1		1		
Cancer cordii & rectum	2		1		1
Diarrhœa colliquativa	11	4	2	3	2
Anasarca, renal and cardinal	2	2			
Anasarca (acute)	4			3	1
Diabetes mellitus	2	1			1
Nephralgia	1	1			
Ischuria urethralis and renalis	2	1		1	
Tabes mesenterica	1	1			
Rheumatismus acutus	10	7		3	
— chronicus	12	9		3	
— syphiliticus	3			3	
Icterus	3			3	
Epilepsia	4	3		1	
Chorea	2	1		1	
Paralysis and hemiplegia	4	2		2	
Cerebro-spinal disease	1			1	
Neuralgia	2	1		1	
Erysipelas	2	2			
Rubeola	2	2			
Syphilis tertiary and gonorrhœa febrilis	3	2		1	
Amenorrhœa	2			2	
Cephalœa and otorrhœa	2	2			
Fever, synochus	7	4		3	
Asthœnia and exhaustion	4	1	2		1
Total	185	77	21	67	20

Of the 25 cases of phthisis, it is seen that 18 died, which deaths were, to the whole mortality, 41, in the table, as 1 to nearly 2·3. The average age of the fatal cases of phthisis was, in the men, 32·33 years, and the average number of days they were in the hospital were 40·11; while the average age of the females was 26·2 years, and the number of days they were in the hospital, previous to death, were 54·4; the average age at which the whole 41 deaths took place was 38·3 years for the females—the youngest of whom was 13, and the oldest 61; while, for the males, 37·6 was the average age—the youngest of whom was 15, the oldest 70.

The great majority of the phthisical cases came into the hospital with all the rational and physical signs more or less evident upon them, the disease having, in many instances, a long previous duration, according to the patient's report. They had almost all undergone treatment of some kind, either at their own houses, or as out-patients at public institutions. Some were again received with the pulmonary disease in progress upon them, but in the absence of physical investigation it was masked by diarrhœa, catarrhal attacks, gastric affections, or amenorrhœa; and it was only after these adventitious complaints were subdued or cured that the constitutional disease was revealed and stood isolated in its true and fatal character. Two cases seemed to display themselves first in the hospital, one of whom, a very interesting case of a girl, of sixteen years, caught the first visible flame of the disease in the wards, where she was received for a gastric affection with *suppression mensium*, after their having twice appeared. The disease gradually manifested itself with every genuine characteristic of the tubercular species, and proved fatal in five months. Her *autopsy* was duly recorded, as all the fatal cases, from whatever disease, are generally submitted to this last test of diagnosis, whenever the consent of surviving friends can be obtained, which, however, is almost universally granted. It would, however, swell a statistical paper of this kind to enumerate, at present, these cadaverous details in any single case to an instructive length. From the advanced condition of the disease with which the greater part of the phthisical patients were admitted, there was no room to attempt any systematic method of prevention, far less of cure. The most that could be adopted was the removal of the adventitious disorders that either marked or complicated the real disease, so as to isolate the pulmonary lesion to the narrowest possible limits. This indication was very generally accomplished in a short time, so that the patients found the last stages of their disorder far less distressing and painful than before their admission; in fact, in many of the cases, as has often been remarked by others under different circumstances of this disease, their latter days were a species of *euthanasia*, especially with the female portion.

The adventitious derangements were treated by alkaline or cretaceous mixtures, along with anodynes or hydrocyanic acid; while mild tonics—as calumba, orange-peel, serpentaria with sesquicarbonate of ammonia or soda, or oxide of zinc with compound camphor tincture—had the effect of keeping up the functions of the secretory and nutritive organs to as normal a pitch as possible. The diet was generous, with porter and a little wine daily, whenever there was no contraindication from ascertained topical congestion or phlogosis. With the view of imparting more tonicity to the blood and its vessels, the citrate, but more frequently the ioduret of iron was, in several cases, from day to day administered, to the extent of ten to sixteen grains daily, and made up into pills with treacle and liquorice powder. Without any expectation of curing, or even of long suspending the disease, we were satisfied with its tonic effect upon the system; the pulse often became firmer, night sweats ceased, and the complexion was

somewhat improved, with feelings of greater strength and appetite, without any increase of pulmonary distress. The naphtha, from Dr. Hastings's recommendation, was exhibited by us in about six cases of phthisis and congestive bronchitis; but, besides being much disliked by the patients, we have not as yet observed any positive effect from its use.

The fatal cases submitted to *post-mortem* inspection afforded a great variety of the morbid lesions occurring in this disease, consisting of purulent and diffused caverns, lined with grey and flocculent membranes, and ulcerated shreds; small, insulated, or communicating vomices, filled with creamy pus or tubercular curd; tubercular infiltration, or segregated tubercles, crude or miliary, surrounded by congestion or lymphous induration; interlobular adhesions; subpleural emphysema; pleural adhesions, more or less recent; and generally effusion into the thoracic cavities to a greater or less extent, but *pneumothorax* in no case decidedly detected.

Heart in these phthisical cases was more often normal than otherwise. In one case it was larger than natural in a young female, full of dense coagula; outer membrane pale and smooth, with five ounces of serum in pericardiac cavity. In another it was normal, with three ounces of serum; and in a third one the organ was pale and anæmic.

Stomach and bowels were mostly natural, with their coats always pale and often diaphanous. In two cases there were marks of previous lesions in the mucous coat of the ileum, and in one of these there were, moreover, observed follicular intumescence and ulceration in the *appendix vermiformis*, with a small perforation. Liver always relatively larger than the other organs, and, in general, showing more than normal subhepatic venous congestion, and in one case there was moderate fatty degeneration. The kidneys, for the most part, exhibited the granular metamorphosis.

Pulmonary Emphysema.

This fatal case, on inspection, exhibited the well-marked vesicular species of this disease, the anterior and upper surface of both lungs being studded with groups of air-bladders, like small bunches of grapes, which were covered by the smooth and glistening pleural membrane. The posterior parts of both lungs were dark and congested, as from recent stasis.

The case marked *indurated lung* is worthy of notice for its duration, the patient now eighteen months in hospital, and confined, during the whole period, to bed, in the horizontal posture. Her business was that of a cook; she is forty-two years of age, and has no marks of a scrofulous nor phthisical diathesis about her; cough has been throughout absent or slight, with no expectoration, except of a little thin mucus; dyspnoea on motion or sitting up in bed; pains, though sometimes severe, only transient, and as often in the left hypochondrium and epigastrium as in the chest; recumbence generally on the left side, though for short seasons, at times, on the right. Chest full, and a little arched, with fulness of the intercostal spaces; both sides nearly equal in circumference, but the right only moves in respiration, and even in a deep inspiration. Left thorax dull and solid to percussion, except just under the clavicle; respiration

nowhere audible on this side, but only a faint and distant tubular sound perceived; right lung clear and normal on percussion, and respiration puerile, even to the middle of the sternum, showing no displacement of the mediastinum; heart's sound normal; pulse about 90, small, but moderately firm; appetite weak, but digestion, and alvine functions natural; has no sweats, and catamenia have at times appeared; is often troubled with neuralgic pains shooting up the left side of the neck, face, and head, and down to the left elbow, producing suffused eye and epiphora; no indurated glands in axilla nor in the neck can be perceived. As the case is one of some interest, its progress will be attended to.

Bronchitis.

These affections all took place in adults and the aged, and the fatal cases were exacerbations of the chronic disease. Stimulants—as senega, ammonia, and naphtha—with a sparing use of opiates, along with blisters, and a regular attention to the bowels and secretion of urine, proved of great service in the majority of them.

Gastro-Enterite.

This affection, whether constituting the sole disease, or accompanying others on their admission, readily improved, or was removed, under a short treatment of mild mercurials, aperients, and simple tonics; but there was much reason to attribute their improvement to the regular diet and regimen to which the patients were subjected when contrasted with the intemperance or poverty in which they lived before they came into the hospital. The fatal case was found, on inspection, to be afflicted with scirrhus pylorus.

Diarrhœa Colliquativa.

Those cases were all admitted with the disease in an advanced form, from persistent diarrhœa or dysentery, and were generally accompanied by phthisis in some stage, though not then to a fatal extent of itself; ulceration and diffused softening of the mucous coats of the bowels were found in those who died, but never any perforation.

Anasarca.

Of the six cases, two were connected with renal disease, along with morbus cordis; while the fatal one out of the other four was carried off with serous infiltration of the lungs. Compound powder of jalap, occasional mercurials, and colchicum combined with saline aperients—as the tartrate of potash, along with regular embrocation of camphorated liniment with ammonia, was the general method of treatment.

Diabetes.

The fatal case was a severe complication of ascites and anasarca with the renal disease. The indications of treatment were at first conflicting, but the dropsies were satisfactorily first removed, and subsequently the peculiar urinary discharge much improved; but an explosion of phthisis carried off the patient. The other case is still under treatment, and the quantity of urine has been diminished from eight quarts daily to six, and down to two, at which amount it has remained for about three weeks, without its saccharine character being quite removed. The ioduret of iron to a scruple daily, in this case, with creasote and the sesquicarbonate of ammonia to thirty grains daily,

have been the medicines steadily employed. Diet has been full and albuminous, and but little bread allowed.

Rheumatism.

This complaint is always frequent in such institutions as the Union Hospital, from the exposure of the working poor to the severities of the weather, and their being very scantily clothed. The acute cases were treated first with colchicum and neutral salts, to purgation, then with opium, to allay pain, with or without a little calomel, according to the state of the secretions, along with liniments containing camphor and ammonia. The chronic and syphilitic cases yielded very satisfactorily, in two or three weeks, to the iodide of potassium in camphor mixture. No metastasis to, nor synchronic affection of, the heart or its coverings were detected in any of the cases; and in none was bleeding adopted in any way, though in some of the acute cases pain was very great, and fever ran high.

Diseases of the Nervous System.

One case of great interest is that marked cerebro-spinal disease, which is still in the hospital, where the patient has been for one year and a half. The case has been one of a prolonged series of alternate tetanic and chronic spasms, affecting the muscles supplied by the suboccipital, phrenic, and dorsal nerves, inducing attacks of episthotonos of cervix and dorsum, violent and noisy hiccup, and tympanitis, without any impairment of the mental faculties. The senses keep entire, except there has been, for the last eight months, permanent contraction of the superior recti of the eyes, with nictitation when she is awake, and more so if addressed. The course of the spine has been, in succession, beset with blisters, issues, and moxas, and covered with stimulant and sedative plasters, besides a number of alterative and narcotic medicines have been given with more or less relief. The tincture of gunjah has been exhibited at two periods of her extreme suffering from singultus and pain. The first administration gave great relief, after producing much talkativeness, and a great sensation of hunger; after which, for near five days, she kept very quiet, without spasm, and somewhat sleepy, but quite sensible. The second exhibition was followed by quieting all the spasmodic symptoms, but without producing the former precursory state of excitement. As the case is one of interest, it will be watched, and, if possible, reported at length.

Cerebro-spinal Neuralgia.

This case is also of some interest, from its enduring more than twelve months, with some prolonged intermissions of health and freedom from pain. The upper part of the head and occiput being first affected with fits of excruciating pain, a long issue was opened, along the course of the sagittal suture, by caustic, and kept open by pæas for two months, till she felt no pain nor uneasiness in the head, but only a slight giddiness. The complaint next elicited itself in the hypochondria and abdomen, but the pain was principally felt and detected in circles radiating round their parietes, often so severe as scarcely to allow of the least touch. These complaints gave way to warm purgative pills, with croton oil, and the occasional exhibition of extract of aconite in half-grain doses, three or four times a-day. The extract gave more

relief than greater doses of opium. Blisters and stimulant embrocations were also auxiliary. She was afterwards discharged, and was acquiring strength and much *embonpoint*, when an epileptiform seizure occurred, and she was placed again under our care. Her subsequent history will be attended to.

Epilepsia.

These cases received most benefit, in our hands, from antimonial pustulation, or caustic issues, high in the nape, resinous aperients, with croton oil, and the cold douche to the head. In one of the cases, 280 grains of the nitrate of silver were given in about sixty days, without more than prolonging the intervals between the fits. There was not the least discoloration of the skin produced, perhaps owing to the simultaneous use of the iodide of potass. The tincture of gunjah was also given, with the effect of only producing much talkativeness and extravagance of behaviour.

To make any further remarks on the remaining cases of disease enumerated in the table would be of little interest to the medical statistician or practitioner; and I fear the short observations already made may be esteemed too cursory, and not very instructive. I shall, therefore, conclude this series by observing that such returns can only be accompanied with similar restricted remarks; for, to do due justice to many of the cases tabulated, they must be descanted upon in detail, to which duty we shall endeavour to address ourselves, as time and opportunity will be hereafter afforded.

Manchester, Feb. 1, 1844.

PROVINCIAL MEDICAL JOURNAL

SATURDAY, FEBRUARY 24, 1844.

We have recently had our attention directed to the subject of early education, by the perusal of an admirable paper read by Mr. Turner before the Royal Institution of Manchester. The details of this paper embrace much valuable information on education in general; and when the importance of the inculcation of sound principles, moral and religious, as well as of instruction in the various branches of knowledge to every individual of the great social family, is considered, it will be seen that no subject more worthy the attention of an enlightened audience could have been selected.

We cannot follow Mr. Turner through the many valuable facts, and no less valuable opinions, which he adduces, although, to a full understanding of the question, it would be necessary to enter very closely into much that he brings forward. There is, however, one portion of these inquiries so intimately and immediately connected with the duties of the medical practitioner, consulted, as he often is, on the general management of the children in families, where he is the confidential adviser—we allude to the effects of early education on the health—that we deem it