attended with less suffering than he had anticipated. The bleeding was inconsiderable. An opiate was given and he had no unfavourable symptom. The lint was removed from the socket the day after the operation, a healthy suppuration was soon established, which had nearly ceased at the end of three weeks, when he left the Infirmary.

Since then I have seen him occasionally; for some time a slight discharge remained, but he is now perfectly well.

On examining the diseased eye, the interior was found nearly filled with fungoid disease, which had evidently originated from the upper portion, where the sclerótica was first observed protuberant and discoloured at the time of the operation for the dissolution of the cataract. This accounts for the effusion of blood which then took place. The capsule of the lens had shrunk into a small opaque membranous mass, and the small portion of vitreous humour contained in the space unoccupied by the morbid growth, had become perfectly liquid.

In the preparation may be seen the external projections in the upper part of the eyeball, of a deep red colour, and the fungoid mass, nearly filling the cavity of the organ.

The optic nerve seems free from disease.

It may be some apology for my imperfect diagnosis in the early stage of this case, that, a few weeks before the extirpation of the eyeball, the patient had an opportunity of consulting several eminent surgeons at Hospitals and Eye Institutions in London, who seemed by no means agreed as to the true character of the complaint, and one of whom recommended the excision of the anterior part of the eye (as in the operation for staphyloma) as the most judicious method of removing the disease.

The preparation was exhibited to the meeting.

CASE OF PUERPERAL CONVULSIONS.

By JOHN FAIRCLOTH, Esq., Surgeon, Northampton.

(Read at the Anniversary Meeting of the Provincial Medical and Surgical Association, Aug. 7, 1844.

The subject upon which I am now about to offer a few observations has been of late so much and so ably discussed by various members of our Association, that it is with considerable reluctance I am induced to appear before you; but feeling it a duty, as one of the members of the local council, to contribute my mite of information to the meeting, I thought I could not do better than relate the simple facts of a case which occurred in my own practice, together with the treatment, which ultimately proved so successful.

About twelve months since, between five and six o'clock, a.m., I was summoned to attend Mrs. A—, the wife of a respectable tradesman in this town, the mother of eight children, who was then about 41 years of age, of a robust temperament, and at the time in the eighth month of pregnancy. On my arrival I found her suffering from a most severe attack of puerperal convulsions. Her husband, in answer to my enquiries, stated that the preceding day her mind had been much disturbed by the violent conduct of one of her sons towards her, and that before going to bed she had complained of severe pain in the head, accom-

panied by a sensation of fullness and giddiness. The early part of the night she passed somewhat restlessly, and about four o'clock a.m. he was disturbed by his wife's struggles, and on arousing himself, she appeared to him to be in a fit, which however soon subsided; in about half an hour a second attack came on, which greatly alarmed him, and he immediately gave directions that I should be sent for. On coming to the bed-side, I found her violently convulsed, all her features dreadfully distorted in various ways, frothy matter at the same time exuding from the mouth; the pulse was somewhat slow and labouring, the breathing stentorian, and the pupils contracted; the paroxysm lasted about two or three minutes. On its subsidence, she became somewhat collected, and told me of the great pain she was suffering in her forehead. I also learnt from her that lately the bowels had been much constipated. The intervals between the attacks varied from a quarter to half an hour. I immediately took from sixteen to twenty ounces of blood from the arm; ordered the head to be shaved; applied two dozen leeches to the temples; cold lotion to be constantly used to the scalp. A saline mixture, with two grains of calomel, and the same quantity of compound extract of colocynth was given every three hours, and a brisk cathartic draught taken directly. I then left her for a couple of hours, and on my return found the paroxysms had not abated either in force or frequency. She was also incapable of being roused between the attacks, as heretofore. The pulse still full, the pupils contracted, and the breathing laborious; nor had the bowels yet been acted upon. I considered no time was now to be lost; I, therefore, immediately sent for my cupping instruments, and withdrew about twelve ounces of blood from the nape of the neck, and then applied a blister to the same place, also sinapisms to the calves of the legs. I injected, too, a considerable quantity of warm soap-suds, with castor oil and turpentine, which, after a short time, produced a copious evacuation from the bowels. I ought, before this, to have stated that on my second visit I made an exploration of the uterus per vaginam, but found no dilatation of the os tincæ, nor was there the slightest discharge; the convulsions still kept on unabated, at about the same intervals, and in this state of matters, considering the importance of the case, and the immensely valuable life of my patient, on account of her very large family, I deemed it my duty to recommend a second opinion should be taken, to divide the responsibility with myself; accordingly Dr. Kerr, one of the physicians of this town, was sent for by my desire, and attended almost immediately. Upon a consultation, he entirely and most liberally confirmed all I had done, and we agreed that the only chance to save our poor suffering patient was to cause the uterus to throw off its load. The bowels had again been freely moved, and we determined to wait a short time, as the paroxysms at this stage (two p.m.) were neither so violent nor so frequent: still consciousness was not restored, and during the intermissions she would sit upright in bed, and look wildly around, not knowing what she either said or did. About four p.m. I was summoned somewhat abruptly, and on my arrival the nurse informed me she accidentally discovered our patient had been unconsciously delivered of a still-born female child. From this time all

convulsive symptoms subsided. The head was still kept cold, by the frequent affusion of cold water from a height, as also by the constant application of the lotion. The calomel was discontinued the following day, and merely an effervescing mixture given, alone, every four hours. On the third day from the attack consciousness partially returned, and on the day following she knew all and everything about her, but had no recollection whatever of anything which had been done for the preceding three days. The bowels were regulated by an occasional dose of blue pill and the compound extract of colocynth; the effervescing saline was also continued with a light nourishing diet. The milk gradually subsided by the usual means, and the patient was perfectly convalescent in about ten days from the attack. She has aborted once since that time, but has never had the slightest indication of a return of her former attack, excepting an occasional headache, which I attribute to stomach derangement, she being of a bilious habit.

Whether *congestion** was the cause of these convulsions, or, as is urged by some, "loss of equilibrium between the arterial and venous blood circulating through the brain,"† or again by its *sympathy*‡ with the nervous system of the uterus, I shall leave others, who have older and wiser heads than myself to determine.

Northampton, July, 1844.

* C. R. Bree, Esq., Provincial Journal, May 1, 1844.

† Dr. North Arnold, Provincial Journal, April 24, 1844.

‡ Dr. North Arnold, Provincial Journal, June 12, 1844.

CASE OF PUERPERAL CONVULSIONS.

By H. DAYMAN, Esq., Milbrook, near Southampton.

TO THE EDITOR OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

SIR,

If you are not heartily sick of the subject, allow me to submit to your readers another case of puerperal convulsions, which, at the time, exhibited certain features of interest.

The subject of the present case, a fat plethoric woman of 40, had borne seven children, and all with "good times." Not long since, at the expiration of the eighth utero-gestation, her days being accomplished, I was called on to attend her in her labour. On enquiry no evidence appeared of the commencement of labour; there was uneasiness about the epigastrium, nausea, slight headach, no yielding of the os uteri, pulse 80 and vigorous, tongue moist, œdema of the legs. Nothing however seemed to call for immediate interference. At six in the afternoon, four hours after my first summons, I hastened to her bedside on hearing that she was in strong convulsions, and the usual horrible scene presented itself. She had been convulsed for two hours with scarcely an intermission; on the first cessation therefore of the epileptic paroxysm, sixty drops of Battley's sedative were given, to which succeeded a calm for two hours, accompanied by profound sleep; after this the fit returned with its original violence. I now resolved on blood-letting, and thirty ounces were accordingly taken from the arm, without producing any other

visible effect on the system than the restoration of tranquillity; an hour after the bleeding, labour began, and within three hours a dead child was expelled, without the knowledge of the mother; from this time up to seven o'clock on the following morning, she lay in a dull comatose state; a slight convulsion then came on; ordered thirty drops of Battley's sedative. In an hour consciousness returned, and at ten she could sit up and converse. Urine *not* albuminous. The tongue being frightfully swelled, and deglutition difficult, two drops of croton oil were given; the bowels acted after some hours, and with the occasional use of castor oil, she rapidly recovered.

The mass of practical men will probably ascribe the success of the foregoing treatment to the "heroic" bleeding; at the same time I, who saw these terrible things, "*et quorum pars magna fui*," cannot refuse to the opium a share in the victory. Without entering into any special pleading on the merits of reflex or sympathetic theories, I shall be content to call attention to the efficacy of opium in certain anomalous puerperal states, well known to obstetricians, and its power in nervous, and some acute cerebral affections,* and to attribute much of the therapeutic effects above related, to the subjugation of nervous irritability, before that direct relief was given to the circulation.

The subject under consideration has been one of warm controversy, and while openly seeking information myself, and acknowledging the necessity of candour and plain speaking, in medical matters, I am yet reminded of Horace's significant allusion.

"Sed tacitus pasci si posset corvus, haberet
Plus dapis, et rixæ multo minus invidiæque."

I am, Sir, your obedient servant,

HENRY DAYMAN.

Milbrook, near Southampton,
August 7, 1844.

* See the history of an epidemic Meningitis, at Strasbourg, related by M. Forget in the Gazette Medicale de Paris, 1840-41.

PROVINCIAL

Medical & Surgical Journal.

WEDNESDAY, AUGUST 28, 1844.

It is now some years since that the present head of her Majesty's Government, then holding the same office which is now filled by Sir James Graham, introduced certain measures into the House of Commons for the reform of portions of our system of jurisprudence. These measures were to have been followed by others, and had the Right Honourable Gentleman at that time continued to administer the duties of the Home Office, there is reason to believe that many wholesome improvements in various parts of our legal code, and in the methods of conducting legal proceedings, might have been enacted. We do not, however,