of its *athenic* character, but is always discernible from *phlegmonous* inflammation, in the puerperal, as well as in other states; that it *originates* in an *animal poison*, which both operates as a *contagion*, on personal communication, immediate and indirect, and as an *epidemic atmospheric influence* beyond the range of all personal communications, in which characters, also, it resembles the poisons of the exanthemata; that this poison is probably the same as that of erysipelas; that it operates *epidemically* only when certain extraordinary but natural conditions of the atmosphere concur with it; that the *general treatment* should be more analogous to that of synochus and typhus, with secondary inflammation, and of the exanthemata, than to that of *pure inflammations*; and the successful treatment of *cholera* and *erysipelas* in particular, suggests useful analogies for our guidance in this disease.

(Notes and Illustrations of Puerperal Fever, derived from the unpublished treatises of Dr. George Fordyce, Dr. Osborne, and the late Professor James Hamilton, will shortly appear, in continuation of the foregoing paper.)

CASE OF VENEREAL IRITIS, WITH OBSERVATIONS.

By CLEMENT HAWKINS, Surgeon to the Dispensary and Female Orphan Asylum, Cheltenham.

B. A., aged 41, a shoebinder, was admitted an out-patient of the Cheltenham Dispensary, under my care, August 5th, 1843, with iritis of the right eye, of a fortnight's duration.

In the month of January, both she and her husband were under my care with iritis, accompanied with ulceration of the throat, scaly eruption of the skin, and other venereal symptoms. Both were treated by local bleeding, mercury, sarsaparilla, and iodide of potassium. The man had a relapse, which required venesection and the exhibition of mercury again for its controul. Both have continued well up to the date of the woman's present illness.

She assures me she has had no fresh venereal disease. The symptoms at present are those of well-marked iritis; obscure vision; anterior chamber muddy; pain in the ball exasperated at night; sclerotic inflammation; iris looks puckered at its small annulus, and is discoloured; circumorbital pain very severe. She looks pale and ill nourished, and knowing this disease to occur so often in people of a cachectic habit, a state in which mercury is ill adapted to relieve, I hesitated what plan of treatment I should adopt. Turpentine suggested itself to me, but as the disease was so far advanced I did not like to give it, as I had no personal experience of its utility. Ordered twelve leeches. Pilula hydrargyri, two scruples; opium, three grains; tartarized antimony, one and a half grain: to make twelve pills, one to be taken three times a day.

August 7th. Much worse, mercurial fœtor on the breath, pain excessive, external redness increased. To take an aperient draught, and afterwards the following mixture:—

Spirit of turpentine	6 drachms.
Mixture of acacia	1 ounce.
Honey	$\frac{1}{2}$ ounce.
Sesqui-carbonate of soda	2 scruples.
Sedative solution of opium	$\frac{1}{2}$ drachm.
Water	5 $\frac{1}{2}$ ounces.

Take an ounce three times a day. Extract of belladonna over the eyelids.

9th. I was much pleased to see the improvement which had taken place. The pain has diminished, the vascularity has decreased, the iris looks brighter, vision less obscure.

11th. All the bad symptoms have returned with increased vigour. She says the pain is almost intolerable, she complains of vertigo. Although her appearance is such as to forbid venesection, I was determined to risk it. She lost above twenty ounces from the arm with the greatest benefit, without fainting. The blood was buffed.

14th. The condition of the eye is worse, portions of lymph are seen floating in the anterior chamber. Considering the use of turpentine to be of no avail, I ordered calomel, twenty four grains; opium, four grains: to be made into twelve pills, one to be taken three times a day. A blister to be applied to the neck, and the extract of belladonna to the eyelids, an hour before the pain is expected in the evening.

16th. Improved. Mercury has affected the gums; the pupil was dilated by the belladonna.

20th. Has had a relapse; external redness has increased, with a corresponding degree of pain. Ten leeches to be applied; calomel and opium to be continued.

23rd. The mercury has irritated the bowels, and the symptoms have become aggravated; the mercurial fœtor is strong, but there is no flow of saliva.

26th. Is in less pain, but the condition of the organ is in no way improved; complains of a deep-seated burning pain in the ball. The mercury does not seem to act beneficially. This may be in a great measure accounted for by the poverty she suffers. She has been taking the compound chalk mixture and the calomel and opium. I now directed her to take a dose of castor oil; and three grains of mercury, with chalk, with a quarter of a grain of opium, three times in the day.

29th. On visiting her to day, I was much pleased to find the aspect of the case altogether changed for the better. The mercury has acted most powerfully, producing ulceration and swelling of the cheeks; the external inflammation has diminished, and the pain has gone.

September 2nd. Considerable improvement; very weak. Repeat the pill every other day. Four grains of the carbonate of ammonia, in an ounce of camphor mixture, to be taken three times a day.

16th. I lost sight of her till to day. She has been in the country; is much improved in health; says she can see when she looks down, but cannot when she looks above her head. The iris appears adherent superiorly to the capsule of the lens, in which situation the fibrous structure is nearly lost. Has diarrhœa. Repeat the compound chalk mixture.

20th. The irritation of the bowels has subsided; there is a chronic inflammatory action lurking about the iris; the vision is very imperfect, and the iris has not recovered its wonted appearance. I ordered her to take regularly,—bichloride of mercury, two grains; tincture of cinchona, two ounces: a teaspoonful three times a day, in compound decoction of sarsaparilla.

Oct. 10th. A decided change has taken place both in the eye itself, and in her general health; says she can

see to read large print; complains of a nasty taste in the mouth, which I attribute to the bichloride. I reduced the dose one half.

Nov. 16th. She was discharged quite well, and, I believe, free from venereal taint.

Remarks.—The case I have detailed at some length, appears to me to possess some points of interest. The circumstance of both husband and wife being affected with iritis, accompanied by eruption and ulceration of the throat of the same character, tend to favour the opinion advanced by Mr. Carmichael, of Dublin, viz., that there is a plurality of venereal poisons.

In regard to the treatment of this interesting disease, the result of my experience and observation is decidedly in favour of active antiphlogistic measures at the commencement. My attention was directed to the efficacy of bleeding in iritis some years ago. A fellow pupil requested me to look at his eye; he said he could scarcely see with it. This discovery, which was purely accidental, was made by putting his hand before the sound eye; I observed the iris to be discoloured, and the pupil irregular; he complained of no pain. As I knew he had had a sore on the penis some months before, which healed under the use of lunar caustic, I advised him to go immediately to Mr. Charles Fowler, who desired me to bleed him till he fainted, and apply a dozen leeches around the orbit. I accordingly made him stand up, and opened a vein in the arm, and allowed forty-five ounces of blood by weight to flow rapidly; he did not faint. Being a young hand, I considered I had abstracted quite enough blood for one bleeding, and tied up the arm. In the evening I applied the leeches, as he complained of pain, and the eye began to look red. All the symptoms of intense iritis were aggravated the next morning. Mr. Fowler took twenty ounces of blood from the arm, which did not make him faint. The blood in both instances was highly buffed. Calomel and opium, premised by free purgation, was given, and the usual remedies employed, and although mercury was given internally, and the strong mercurial ointment rubbed in, he was never salivated. The eye got well in three weeks. From exposure to cold, and other imprudence, he suffered two relapses, which required the same active treatment for their cure. I firmly believe, if the free abstraction of blood in this case had not been adopted, the eye would have been lost.

I have preserved notes of many cases of iritis, and I have repeatedly met with others, in which I have considered that moderate abstraction of blood locally, would be advantageously substituted for general bleeding; and I have been afterwards obliged to take blood from the arm, at an advanced stage of the disease, in order to arrest the progress of a destructive inflammatory process, when such a proceeding ought to have been the first step in the treatment. "Judging from my own experience," says Dr. Monteath, "I differ decidedly from those who put their whole faith in mercury for the cure of this species (syphilitic) of iritis, to the exclusion of other remedies, such as bleeding, blistering, &c. In my own practice I have seen the disease running on to dangerous hypopion, notwithstanding the full action of mercury, and its further progress at once arrested by a free bleeding from the arm, and a blister on the hind head."

To illustrate the views I entertain regarding the

treatment of this important disease, I cannot forbear quoting the words of an able writer in the *British and Foreign Medical Review*, October, 1844, page 34:—
"It is true that we cannot at once cure any inflammation; that peculiar condition of the capillaries, which is the very essence of this affection, cannot be annulled at a blow. What we really effect by blood-letting, and other antiphlogistic measures, is the placing of the inflammation within the sanatory power of the constitution; by such measures, the dilated and distended vessels commence the process of contracting and unloading themselves, and the resorption of fluids is begun. The completion of the process may require days, and during this period additional means of the same nature as those originally employed, may be demanded to accelerate it, if tardy, or to combat some augmentation of the morbid condition. How often have we watched the course of this process in the eye."

I could not have pictured to myself a more improper subject for venesection than the woman whose case I have narrated. I deferred bleeding her from day to day, from an ill-grounded dread of its effects. The relief she experienced was immediate, and I have little doubt in my own mind, that if it had been earlier adopted, much suffering might have been prevented, and much anxiety spared the medical attendant.

I am induced to think that the incomplete recovery of vision, in many instances, is to be attributed to the inefficiency of bleeding, and other antiphlogistic measures, at the onset of the disease. In hospital and dispensary practice, many cases are not seen till the disease has made rapid strides towards the destruction of the sight. Stimulating washes and ointments are ignorantly employed for days before proper medical advice is sought; this is, of course, one of the chief reasons why the treatment is less successful among the poor than the better classes of society. Many cases are often seen among the out-patients of public medical charities, in which a lengthened course of mercury is often of signal benefit; the bichloride, given in fractional doses, in combination with bark and sarsaparilla, appears to me to deserve our best consideration. This medicine I consider to be exceedingly useful in removing the effects of iritis; under its use the constitution of the patient improves, and the tone of the digestive organs is restored.

PROVINCIAL

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Upon consideration of the numerous documents, reports of meetings, petitions to Parliament, memorials to Sir James Graham, &c., relative to the New Medical Bill, which have been published in this Journal, it cannot fail to be perceived that the amount of protection proposed to be conceded under the new bill, is very generally felt to be insufficient for useful purposes. While acknowledging the advantage of the changes introduced in this respect, and particularly of that clause by