a buffy coat with whitish striæ; twice with greyish striæ only; once it was of a brownish red.

Second Blood-lettings.—The proportion of globules was here still more notably diminished. The albumen preserved the same low figure, and the fibrin was a little less than what it was on the first venesection. The fatty matters varied but little, except the cholesterine, which was in every case increased. The phosphates were very abundant. These results were manifested without exception, in the three second blood-lettings.

It should be added, that the serum was once slightly, once considerably, and once very abundant; and in all three cases slightly turbid. The clot was voluminous and resistant in each; twice it was buffed with striæ; once it only presented whitish striæ.

The third blood-letting gave a fresh diminution of the globules, and a slight decrease of the fibrin; the albumen remained low. There was a diminution of the phosphorated fatty matter, and an increase of the cholesterine.

(To be continued.)

CASE OF CEPHALOMA, CURED IN THE FOOT, SUBSEQUENTLY DEVELOPED IN VARIOUS INTERNAL ORGANS.

By RICHARD FRANCIS GEORGE, Esq.,
Senior Surgeon to the Bath Hospital.

A healthy woman, aged 35, in October, 1843, discovered in the hollow of her left foot, a painful purple tumour of the size of a pea, which continued to increase for six weeks, when the skin cracking over it, she first sought medical advice. From December to June, in the following year, when she came to reside in Bath, were applied in succession, poultices, strapings, nitrate of silver in solution and substance, Bates' copper lotion, a double ligature, potassa fusa, and finally the caustic paste, while her failing powers were attempted to be sustained by a generous diet, with quinine and steel. At the time she came to Bath, the tumour had attained the size of a pullet's egg, but was circular in form and much elevated; its surface was smooth, of a purple chocolate colour, and bled upon the slightest touch, while the edges of the surrounding skin were hard and everted; and in the integuments, for four or five inches round the tumour, were scattered several smaller ones, firm and rather insensible, resembling in colour and shape the original at the time it was first noticed. The glands in the upper part of the thigh were enlarged and tender; the patient's complexion, naturally dark, had acquired the sallow leaden hue, which usually accompanies malignant disease; her flesh and strength were gradually decreasing, her appetite was bad, and her nights rendered sleepless by pain.

The obviously malignant character of the tumour, and the state of the femoral glands, forbidding the doubtful resource of amputation, the woman was directed to apply moistened linen to the part, and to take three times a day twenty drops of Brandish's alkaline solution, combined with cascarrilla, with the view, if possible, of causing some renewal of appetite and strength. For the first five weeks that this treat-

ment was pursued, no perceptible change took place, either in the tumour or health; but in the sixth week there was an evident improvement in both, and when the patient left Bath, in September, she had recovered her appetite and strength, and her complexion had nearly regained its natural colour, while the tumour, contracted to the level of the neighbouring skin, had firmly cicatrized, many of the surrounding tubercles had disappeared, and the glands in the thigh were much reduced in size.

The woman remained well, both as to her foot and general health, up to the end of May in this year, when, though no change appeared in the former, her appetite and strength began to flag. On the 15th of June she was seized with vomiting and purging, followed by pain in the region of the liver and jaundice, and she died on the 11th of July. During the month which preceded her dissolution, the femoral glands had attained the size of a large hen's egg; and many small, firm, pale tumours, appeared beneath the skin covering the thorax and abdomen, some of which were accompanied by enlarged veins, and small extravasation of blood.

An examination was made eighteen hours after death. There were two small pearly deposits beneath the pleura of the lower part of the left lung; both lungs were studded with cephaloid tubera in every stage of degeneration; two very minute tubercles were deposited in the subserous membrane of the left ventricle of the heart; the liver was much enlarged, and throughout was crowded with innumerable cephalomatous tubera, varying in size from that of a small shot to that of a pullet's egg, in every stage of growth, and all more or less deeply tinged with yellow; the substance of the liver was gorged with bile, and in the vicinity of the larger tumours shewed much vascular congestion. In the sub-mucous tissue of the ileum were two purple, oval, flattened tumours; the inguinal glands were connected with a still larger mass, lying behind Poupart's ligament; both were of a firm texture, and of a uniform white colour.

The paper was illustrated by coloured drawings of some of the morbid growths in the lungs, liver, and intestines, made by Mr. Hensley, as well as a beautifully-coloured cast of one of the tumours in the ileum.

MALFORMATION OF THE UTERUS: ONE KIDNEY DEFICIENT: PTYALISM CAUSED BY THE INTERNAL USE OF BISMUTH.

By JOHN CARDEW, M.D., Physician to the Bath Hospital.

Ann Hitchings, aged 38, was received into the Hospital July 7, 1845, upon the recommendation of Mr. Thomas Warner, of Cirencester, by whom, conjointly with Mr. Charles Pooley, the following interesting history of her case was kindly furnished.

She was four feet two inches in height, and always of an active bustling disposition, up to the commencement of her first illness, eight years ago. She did not menstruate till between the twentieth and twenty-first year, and afterwards very irregularly, the interval between each return varying from a week to five months. The catamenia were always scanty and pale, but unattended with pain or uneasiness of any kind. The statements

with regard to the urine were conflicting; one account representing it to be copious, very pale and inodorous, and slightly albuminous; while the patient's mother-in-law now asserts that it was always scanty, and that she had frequently known her pass a whole day without voiding any. During the time she was in the hospital, the secretion, both as to quantity and quality, agreed with the former of these representations. She attributed the origin of her complaint to a violent cold caught by gleaning in a wet field; when she began to suffer from a dull aching in the loins, disabling her from lifting anything weighty, and accompanied by a sharp lancinating pain, which she described as shooting all over her, and, for a minute, taking away the use of her legs. These shocks recurred as often as four or five times during the day, and unless she was near any support, she generally fell. Her arms were sometimes affected, but not often. Her principal uneasiness was confined to the loins, and not at all to the spine itself. About two years after her marriage she became very large, and from the suppression of the catamenia during seven months, thought that she was pregnant, but the swelling gradually subsided. Since then she had only menstruated two or three times, and five years had elapsed since the last appearance of that discharge. Her husband stated that she was quite like other women in regard to sexual desires. Her countenance was pale and sallow; she complained greatly on being touched, and screamed aloud if the fingers were passed rapidly over the abdomen; but firm pressure caused her no uneasiness. For some time she had been subject to twitchings of the muscles of the face, and frequent winking of the eyes, with intolerance of light; but her head had never been much affected. She had also, at different times, attacks of what might be called congestive pneumonia, but, on two or three occasions, they partook apparently of a more active character, attended with membranous inflammation, so that venesection was had recourse to, when the blood presented the usual buffy aspect, and once or twice to a great degree.

At the time of her admission into the hospital, her skin was dry, and rather hot; her tongue clean; bowels rather costive; pulse averaging 84, small and easily compressible; appetite good; auscultation good throughout. The singular screwing up of the features and winking of the eyelids, seemed to proceed from some affection of the base of the brain; while the impaired motor powers, and excessive sensibility of the integuments of the abdomen, appeared to have their origin in a morbid condition of the spinal membranes; but as she had neither pain nor heat in the head, nor tenderness at any part of the spine, and as at an earlier period she had been subjected to local depletion, and counter-irritation, it was considered that no active disease was in progress, and that the treatment should be directed to repairing the consequences of former inflammatory action. With this impression she was directed to use the bath, and her bowels were regulated by aloetic aperients; and after a time, she was allowed to drink the Bath waters.

Up to the 21st of August there was little change in her state, but as she then complained much of gastrodynia, she was ordered to take, twice a day, five grains of trisnitrate of bismuth, with a cordial alkaline draught. This treatment was continued until the 26th, when a

profuse salivation supervened, precisely resembling, in the appearance of the mouth and *sætor*, that occasioned by mercury. She was now kept in bed, had her bowels attended to, used gargles, and had nourishing slops, with eggs, &c.; to which was added, on the 4th of September, four ounces of sherry daily. On the 12th and 13th her mouth began to mend, and her general state to become more comfortable; but on the 14th, her evacuations having passed involuntarily, it was necessary to change her linen and bed-clothes. As usual when moved, she complained bitterly of this process, but did not apparently suffer from it until the evening. Mr. George was called to her at nine o'clock, when her extremities were cold, her pulse fluttering, and her breath had that stertorous character which is met with in scarlatinous patients, whose throats are badly affected. Sinapisms, hot bottles to the extremities, and internal stimulants failed in exciting any reaction, and she died at ten the next morning.

Examination thirty hours after death.—The brain and the membranes investing its upper surface were perfectly healthy; but the pia mater at the base, shewed much vascularity, and the vessels became more numerous where that membrane was continued over the medulla oblongata; in the right lateral ventricle were about ten drachms of serum, and twenty in the left; the pia mater was much injected throughout the whole length of the spinal cord, the vascularity being most intense at the commencement of the cauda equina; the theca vertebralis contained six drachms of fluid. There was no effusion into the cavity of the chest; the lungs exhibited some venous engorgement, but were not otherwise unhealthy; the heart flabby, and, like the other viscera, small. Notwithstanding the general emaciation of the limbs, there was a thick layer of fat upon the muscles of the abdomen, as well as in the omentum and mesentery; the stomach and intestines were healthy; the left kidney was small and pale, but not granular. On the right side *no vestige of a kidney could be traced.*

The uterus was divided into two portions, connected by a narrow neck; the lower part, in the centre of which was the orifice, was of about the size of a cobnut; the upper part, an inch and a half in length, was of the thickness of the little finger of a small hand.

A POSTSCRIPT TO THE REMARKS ON PUERPERAL FEVER.

By EDWARD BLACKMORE, M.D., Bath.

In the *Dublin Medical Journal* for May, Dr. A. H. McClintock has given a very interesting account of puerperal fever, which lately prevailed in the Lying-in Hospital of that city. I may be allowed to remind the members of the Provincial Association of some of the more remarkable phenomena of that fever.

In the first case, in ward 4, death occurred on the ninth day of the disease; during this period no other cases occurred. In the next three days, eleven patients were attacked in various other wards, and seven of them died. In ward 10, only one patient, the second case, was attacked; in ward 11, only one of seven was attacked; in ward 1, of five patients, two were attacked and died; in ward 2, of seven