after immersion, but failed in several other cases, possibly from the means employed being persisted in for a too limited a period. In the present instance I was not less astonished than the by-standers, at observing the enlivening effect of a dose of warm breath on each occasion of the heart faltering, and the respiration flagging, or even ceasing altogether. The use of a less deteriorated air, or one to which a little oxygen had been added, would have been, as Dr. Clay remarks in the *Medical Times* of September, "very desirable if it could be procured;" but I confess that the encouragement afforded in the above narrated case will in future, regardless of an over refined chemical physiology, induce me to pursue a similar course, and to be guided in my exertions, like Dr. Douglas,* by no measurement of time.

* *Medical Gazette*, December, 1812.

UNIVERSITY COLLEGE HOSPITAL.

CASE OF CHRONIC INFLAMMATION OF THE BLADDER.

(Reported by W. H. COLBORNE.)

William Woollams, a servant, aged 68, married, was admitted into this hospital, August 27th, 1845, under Dr. Williams, for asthma. The patient is of the middle height, lymphatic temperament, with a sallow complexion, and of tolerably regular habits, and has been accustomed to good living. Though he has suffered from severe colds occasionally for these last few years, he has not been compelled to keep his bed from illness since an attack of inflammation of the bowels thirty-eight years ago, until he was laid up by rheumatism, at the beginning of last winter, on recovering from which he caught a severe cold soon after Christmas, had a cough, and expectorated pellets of thick mucus; for this he applied at a dispensary and was relieved by the treatment adopted. In May he was again ill, and suffered from troublesome shortness of breathing with a dry hacking cough, and was very much weakened. In July he was taken into King's College Hospital; some ulcers of the legs co-existing with a varicose condition of the veins were there healed, and his cough and dyspnoea somewhat relieved; he left this hospital on August 13th, and his dyspnoea became much worse. Has had gonorrhoea several times during the earlier period of his life, and has been aware of having a stricture of the urethra for these last forty-two years, and for some time has required to have the catheter passed, from inability to make water; nothing, however, of a satisfactory account can be drawn out of him respecting the history of his urinary disorders, as he is very irritable, and his dyspnoea prevents much intelligible conversation.

Present condition. Is extremely weak, with an anxious expression of countenance, and his body is generally anasarous. The difficulty of breathing prevents his lying down in bed, and obliges him to keep in the semi-erect posture; he experiences a constant pain at the epigastrium, much increased during the paroxysms of dyspnoea, which recur about every ten minutes, and occasionally last for five or ten minutes; the shortness of breath is, however, very distressing between the paroxysms. Pulse small,

quick, and weak; he has no rigors nor increase of heat, no perspirations, skin cool; has a slight cough and expectorates some viscid mucus in small clots, mixed with some yellow purulent-looking matter. Mouth rather dry; tongue furred and white; feels a slight thirst, appetite bad. The heart's action is extensively felt; sounds clear; no murmur audible. On percussing the chest a general resonance is found in front, and the lower and posterior parts are much duller than is natural; breath-sound, whiffing, with some mucro-crepitation; bowels costive; abdomen enlarged, with slight superficial fluctuation and some oedema of the walls. There is a little tenderness about the right kidney; frequent and painful micturition; urine scanty, high-coloured, specific gravity 1.017, alkaline, deposits a great quantity of brownish viscid mucus, and contains a large proportion of albumen.

27th. A blister was applied between the shoulders, and a draught with half a grain of extract of stramonium, fifteen drops of tincture of squill, and the same quantity of tincture of digitalis, given thrice a day; the bowels being costive a pill of calomel, conium, and colocynth was ordered at bed time.

28th. The blister has not risen; the passing of the catheter was called for last night.

29th. Bowels freely moved; urine deposits less mucus, specific gravity 1.020, slightly acid, and shewed, on standing, a sediment, consisting of the triple phosphates and pus-globules.

The breathing became easier under this treatment, though he had a severe paroxysm of dyspnoea on the night of the 2nd of September; the urine became much less albuminous shewing only a slight quantity, but the deposit of ropy mucus was not diminished. On the 2nd September a draught of an ounce and a half of infusion of pareira, and twenty minims of tincture of henbane was substituted for his former draught, and croton oil was rubbed in on the back of the chest, and repeated until it produced a thick crop of pustules.

9th. The following draught was substituted for the last:—

R. Potassii. Iodid, gr. iij.; Tinct. Scillæ, m. xx.; Liq. Potassæ, m. xx.; Tinct. Hyoscyami, dr. ss.; Mist, Acaciæ, dr. j.; Aquæ, oz. j. M.

The patient gradually improved until the 15th, when he complained of severe pain in the lower part of the abdomen, and constant desire to make water, which passed only by drops; five ounces of high-coloured alkaline urine were drawn off.

On the 16th the pain was better, and his micturition tolerable easy. Three quarters of a grain of extract of belladonna was substituted for the tincture of henbane.

18th. Catheterism was again necessary; the urine contained the same mucus, a little albumen, and an excess of the phosphates.

On the 19th his asthma being much better, he was transferred to the care of Mr. Quain, to be treated for the disease of the urinary organs. He is now able to remain in a less erect position, has a constant desire to make water, which is voided with great pain and straining, depositing a great quantity of ropy viscid mucus, which adheres to the bottom of the vessel.

R. Infus. Buchu., oz. iss.; Tinct. Hyoscy. m. xx. Sit haust. ter die sumend.

20th. A catheter (No. 7) was passed, and a slight

stricture found to exist in the membranous portion of the urethra.

The difficulty of micturition continued, the state of the urine was unaltered, and on the 25th he complained of a harassing hacking cough, and was ordered a mixture of ipecacuanha, syrup of poppies, and mucilage.

29th. There is considerable fever to day, and some nausea; a mixture of citrate of potass and camphor mixture was given.

30th. Passed a sleepless night. R. Pulv. Doverii, gr. x. h. s. He was ordered a hip bath.

Oct. 3rd. Fever and nausea much diminished.

4th. Much worse to-day; micturition most painful and frequent. To use the hip-bath again.

R. Tinct. Opii, m. x.; Vini Ipecac., m. v.; Mist. Camphoræ, oz. ss. M. omni secunda hora sumend.

From this time he gradually got worse. On the 7th he was in a half stupid condition, not answering two questions together in an intelligent manner; he became so weak as to be unable to sit up in bed, and still suffered intensely from the frequent desire to make water, and great pain in voiding it. On the 16th he was in a half comatose state, muttering to himself continually. From this condition he did not rally, but died on the 19th.

Sectio Cadaveris, twenty-four hours after death. Body extremely emaciated; lower extremities œdematous.

Thorax:—A small quantity of serum was found in the pericardium, and in both pleural sacs. Lungs adherent to the walls of the thorax in many places, on both sides showing a few spots of emphysema at the interior and lower margins; and some serous effusion throughout both lungs. Heart weighed seventeen ounces and a half; generally and equally hypertrophied, valves healthy.

Left kidney weighed five ounces and three quarters; presented a few patches of Bright's deposit near the surface, as large as peas, otherwise healthy. Right kidney weighed eleven drachms; both cortical and medullary portions atrophied; lining membrane of the pelvis and calyces redder than natural; a few particles of red matter, resembling in appearance the crystals of uric acid thrown down from urine by an acid, were seen in the tubes, and projecting in two or three places at their orifices at the papillæ. The coats of the bladder were of full four times their usual thickness; the inner surface was sacculated by the increased development of the muscular tissue; mucous lining red and congested, especially at the back part, covered in many places by a deposit of dirty adherent lymph. Just behind the bulb of the urethra, the coats of the canal were found thickened for about the length of half an inch by a hard deposit, the seat of the old stricture, and two false passages had been made, the catheter having undermined the mucous membrane for about an inch at the entrance of the bladder; these appeared to be of old standing.

Although no good history could be had of the disease of the bladder and kidneys previous to his coming into the Hospital, it doubtless had its origin from the stricture; and it seems more than probable, that with the heart so much hypertrophied, and such extensive disease of the urinary organs and lungs, the drying up of the sores of the legs must have tended to

accelerate the progress of the morbid changes going on. It may also be worthy of remark, that the asthma from which the patient so greatly suffered was towards the last much better, and the breathing comparatively free; the examination of the two lungs after death shewed very little cause for the urgent dyspnoea the patient experienced.

CASES IN THE HOSPITAL PRACTICE OF T. M. GREENHOW, ESQ., SENIOR SURGEON TO THE NEWCASTLE-ON-TYNE INFIRMARY.

(Reported by CHARLES J. GIBB, House Pupil.)

STRANGULATED SCROTAL HERNIA.

John Vile, aged 52, a well-formed healthy seaman, of the bilious lymphatic temperament, admitted September 17, 1845, labouring under severe concussion of the brain, the result of a fall from a considerable height. By the first of October he had recovered completely, and was to go out on the morrow; the same evening, however, he complained of being ill, and on being visited was found to have a strangulated scrotal hernia of the left side; the hernia had appeared four years ago from a strain at work, and had always been reducible until this morning, at eleven, when, after having walked about for an hour without his truss, he endeavoured to return it, but found his efforts useless, and went to bed; from that time to six p.m., when he was first seen, he laboured occasionally to put it up, but without success; his belly was soft, but tender on pressure; the tumour large, tense, and rather painful. The taxis was used for a considerable time, but as it had no effect upon its size, he was ordered a refrigerant lotion, and had his pelvis raised.

At eight p.m. fresh symptoms had appeared, and he was seen by Mr. Greenhow. The abdominal pain and tenderness were great; vomiting and hiccough were troublesome, and the tumour, which distended the whole scrotum, being about six inches from neck to fundus, and proportionately broad, was tensely elastic, and apparently contained much intestine, with some omentum at its inferior part. The bowels had been purged in the morning early, but since the strangulation had not been moved. The taxis was again employed, but owing to the most gradual and consistent pressure producing intolerable pain, without any diminution in the size of the tumour, or sign that its contents were disposed to retreat, it was not long continued, especially as Mr. Greenhow perceived from the first touch the failure of the attempt. As diarrhoea had existed before the gut came down, it was thought that the free exhibition of opium might induce a favourable change, as similar cases had been presumed to arise from preternatural activity of the intestinal contractions, or muscular spasm at the neck of the sac. Two grains of crude opium, with four of calomel, were therefore given, and ordered to be repeated in two hours if the necessary composure should not have ensued; whilst bladders of ice were to be kept constantly on the hernia. He soon fell into a composed sleep, in which he continued at intervals until the morning.

October 2nd. 10 a.m. Remains slightly under the influence of the opium; free from abdominal pain except on considerable pressure; no hiccough nor