form as follows :—I pour a small quantity of infusion into a glass, on which is added the oil, and again another small quantity of infusion upon it. In this manner the dose may be swallowed, and will slip down without offending the palate, and generally is well retained even by irritable stomachs. Another mode has been successful when many have failed, and will be found equally valuable: it is the yoke of an egg beat up with boiling water and sugar, with which may be mixed a dessert-spoonful of brandy, and on this the dose may be given without producing that nausea so frequently experienced when conveyed by other vehicles.

CASES AND OBSERVATIONS IN HOSPITAL PRACTICE.

By RICHARD CHAMBERS, M.D., Physician to the Essex and Colchester Hospital.

(Continued from page 698.)

CONGESTIVE DYSPEPSIA.

CASE 1.—Stephen Wheel, aged 57, a labourer, admitted July 3, 1845, complains of constant pain in the epigastrium, increased after taking food; suffers also from pain in the loins, and occasionally in the legs; the bowels are confined; the appetite is indifferent; the tongue is covered with a white coat on the dorsum, the sides and edges are florid, the papillæ are very prominent; pulse 68; prefers warm drinks; has an anxious melancholy countenance. Was in the Hospital a year ago for a similar attack.

Applic. Hirudines sex epigastrio alternis diebus.

R. Pil. Hydrarg., Fellis Bovini, utr., gr. iv.; Morphizæ Acet., gr. ʒ. M. Ft. pil. ij., omni nocte sumendæ.

R. Magnesizæ Carbonatis, gr. x.; Tinct. Hyoscyarni, m. xx.; Acid. Prussic., (Scheele,) m. ij.; Mist. Camphoræ, oz. j. M. Fiat haustus ter quotidie sumendus.

26th. Very much better, and is quite free from pain.

Applic. Hirudines tertiis diebus. Contin. alia.

August 1st. States that he is quite well. Omitt. omnia.

7th. Feels quite well, and was discharged.

CASE 2. James Webb, aged 50, a labourer, admitted July 31, 1845; ill four months; complains of pain in the stomach, increased after eating; is sick occasionally; bowels generally moved once a day; urine scanty; feet cold; prefers warm drink; pulse 66.

Applic. Hirudines sex epigastrio alternis diebus.

R. Pil. Hydrargyri, Fellis Bovini, utr., gr. iv.; Morphizæ, Acet., gr. ʒ. M. Fiat pil. ij., omni nocte sumendæ.

R. Magnesizæ Carbonatis, gr. x.; Sodæ Sesquicarb., gr. v.; Acid. Prussic., (Scheele,) M. ij.; Mist. Camphoræ, oz. j. M. Fiat haustus ter quotidie sumendus.

This treatment was continued, and the prussic acid gradually increased to four minims thrice a day. On the 14th of August he was discharged cured. I should not have dismissed him so soon, only that he was anxious to return to his work.

I offer the foregoing cases as examples of a disease of very frequent occurrence, particularly in hospital-

practice. The characteristic symptom is a constant pain in the epigastrium, aggravated after taking food. I have called it congestion, as I think that this closely expresses the pathology of the affection; and has not that tendency to mislead in the diagnosis or treatment that the word inflammatory may possibly have. The disease appears to me primarily to have a common origin with the ordinary forms of indigestion; and to be more immediately excited by the continued use of indigestible, or, more properly, food not adapted to the deranged state of the stomach. It is so gradual in its approach and progress, and is attended by so little excitement of the system, that it is generally looked upon as non-inflammatory, and is by most persons called gastrodynia, and viewed either as an original affection, or as an accompaniment of dyspepsia. The usual routine remedies are purgatives, sedatives, and tonics.

Purgatives are the remedies chiefly employed, and in some cases, where the attack has not been of long duration, and is kept up or aggravated by a loaded state of the large intestines, they prove of unquestionable advantage. But in cases of some duration, where the capillaries of the stomach have been habituated to a state of continued erethism, the relief to be had from purgatives proves of a very slow and uncertain character. There are two causes that contribute to render the purgative a favourite mode of treatment: one, its popularity; and the other, the invariably constipated state of the bowels that obtains in this disease. Since the days of Dr. Hamilton and Mr. Abernethy, there has been a popular prejudice in favour of purgatives; and it too frequently happens that they are made subservient to charlatany and ignorance. Patients generally exhibit an anxiety to have their bowels kept in a state of action; and in fulfilling their wishes, practitioners have at least the appearance of doing something, although they may be perfectly ignorant of the true character of the disease. Constipation is an invariable attendant on stomach affections, and when the mind accustoms itself to habits of routine practice, it only sees in constipation another name for colocynth, scammony, and croton oil, totally overlooking the causes that may have induced the constipation.

We know that it is a law of the animal economy, that two actions differing in degree cannot exist in the system at the same time, as the greater supersedes the lesser. It is upon this law that the principles of derivation and counter-irritation are based. The intestinal canal is endowed with a certain amount of sensibility to enable it to propel its contents onwards for excretion; and should this sensibility become diminished, constipation will be the result, as diarrhœa will be of the converse state. When the stomach is in a state of inflammation or congestion, there must be a transfer of action from the intestines, calculated to reduce their sensibility below par; and the consequence is that they become insensible to the ordinary stimulus of their contents, and in common parlance constipation occurs. On this principle I think the obstinate constipation that attends uterine diseases can be accounted for. In the constipation of chlorosis another element appears to be in action tending to a like result. It is the deteriorated quality of the blood; this being insufficient to sustain vascular action in the intestines and secretory organs. A great error is committed in

supposing that in this class of cases, purgatives can restore healthy secretions, when in fact it is the blood, the material, from which the secretions are formed, that is vitiated; and by recruiting this, healthy secretions will follow almost as a necessary consequence.

The first effect of a purgative is to produce an increased vascularity upon that part of the intestinal canal, to which its action may be more immediately directed, and if this increase of vascularity should exceed a certain limit, it will terminate in inflammation, as the victims of Morrison's pills fearfully testify. This affords us a clue to the temporary relief which drastic purgatives afford in stomach affections; by producing a powerful effect upon the intestinal canal, they necessarily diminish the amount of vascular action in the stomach. It is, however, apparent that their utility is limited, if not questionable, and that if given to any extent, the remedy may prove worse than the disease.

I view this disease as one of long-continued congestion of the mucous coat of the stomach. It is difficult to say where congestion ends, and inflammation begins; but practically the point is not of much importance; the state of the system is such that general bleeding is neither indicated nor required. It is upon local bleeding that our chief reliance must be placed,—local bleeding in small quantities, and *frequently repeated*; it is the latter that invests local depletion with its great value. One large depletion will afford temporary relief; but as the vessels are not able at once to recover their healthy contractility, a relapse will be sure to follow, and I know not if the one depletion will not eventually be productive of more harm than good, through the reaction that will succeed. By taking away blood in small quantities, you do so without causing any alarm in the system.

Sedatives, alkalies, and mercurial alteratives, are employed in the manner illustrated by the cases. It is probable that the benefit may be attributed to these remedies altogether; but I have repeatedly satisfied myself that it is not so, having in many cases given them a fair trial without deriving any advantage till I had resorted to depletion. Sedatives are, however, of great use, as they materially accelerate the cure by diminishing the nervous sensibility; and though this is caused in the first instance by the congestion, it may subsequently continue independent of, and react upon, it. I never give purgatives, and but seldom aperients, as I find that the bowels resume their action under the use of the measures detailed; warm cataplasms prove of great advantage, they act as mild counter-irritants, and by their relaxing influence on the cutaneous vessels, they serve as a partial substitute for depletion, and render a smaller amount of it necessary. I have witnessed important results from the use of the nitrate and oxide of silver in the treatment of this affection, when depletory measures had been premised. But it is impossible to doubt that the empirical and indiscriminate use of these remedies is productive of much mischief,—positively, by their capability of doing harm, and negatively by, as it were, misleading us from the proper line of treatment.

PNEUMONIA SIMULATING PHTHISIS.

Samuel Sergeant, aged 36, a labourer, admitted June 20, 1844, ill a month; was first taken with a pain in the right breast, after an exposure to cold and

wet; he has had a blister and some medicine, but he has been progressively getting worse, and at present complains of cough, weakness, and emaciation; there is also hectic, profuse perspirations, and copious purulent expectoration; there is dulness, bronchophony, gurgling beneath the right clavicle, and extending as low as the fourth rib; bowels confined; pulse 108.

R. Misturæ Aperientis, oz. iss. Sumat statim.

R. Acid. Sulph. dil., dr. ij.; Tincturæ Calumbæ, dr. vi.; Aquæ, oz. vij. M. Sumat oz. j. ter quotidie.

I never saw a case in which the rational symptoms and physical signs of phthisis were more accurately displayed, and indeed when I first saw it, I did not for a moment doubt but that it was a case of genuine phthisis. I prescribed the sulphuric acid, merely for the relief of the perspirations, but in the course of a few days a visible improvement could be seen. Under a continuance of this treatment every symptom of disease vanished, and he was discharged perfectly well. I have since had repeated opportunities of seeing him, and he has continued in the enjoyment of robust health, free from every vestige of pulmonary disease.

It was a case of pneumonia of a portion of the right lung terminating in suppuration, and this, by filling up the bronchial tubes gave the idea of gurgling; and the expectoration and pneumonic dulness, rendered the deception more complete. It is one of those cases, that in the hands of the *consumption-curers*, would have been vaunted forth with no small satisfaction; and I believe that it is entitled to some consideration, in its tendency to convey a lesson of the extreme caution that is requisite in making a diagnosis, particularly in those cases where the distinction is that between health and disease—between life and death.

ON CUTANEOUS DISEASES.

(Continued from page 734.)

Group I.—Class 2nd. Congestions and Hemorrhages of the Skin.

1.—Purpura, (πορφύρα, a shell-fish, yielding purple dye;) the purple or livid disease.

a. Petechia, (petechio, Italian, a flea-bite.) Small purple spots.

b. Vibices. Large purple spots.

c. Ecchymoses (εκχυσις, I pour out.) Purple patches.

Diagn. Often no constitutional affection; no sponginess of the gums, &c., as in scurvy.

Class 3rd. Nervous Affections.

1.—Hyperæsthesia, (υπερ, over or above; αίσθησις, the faculty of sensation;) excessive sensibility.

2.—Pruritus, (prurio, I itch;) itching.

Class 4th. Changes of Colour, (not depending on Congestion).

1.—Ephelis or freckles; sun-spots,

2.—Nævi or mother-spots.

3.—Oxide of silver stain, black or blue.

Class 5th. Morbid Secretions.

Order a. Excessive, as in 1. } Sudatoria, (sweat.)
Stearrhœa, (fat.)

b. Defective, as in 2. Icthyosis.

c. Alteration, as in 3. Sour in rheumatism.

d. Inflammation of the sebaceous glands and adjoining textures.