d Scrofulous Ophthalmy—

Occurs most from the period of weaning to the age of nine or ten. There is a very *watery* state of the eye, and extreme *intolerance* of light; the redness is often slight, at first on the lids, and generally only partial on the eye; the enlarged vessels run in fasciculi towards the cornea, and terminate on it, or the sclerotica, or more frequently on the boundary between them, in phlyctenulæ or pustules, containing a clear or yellowish fluid. The disease is worse during the day.

e Eruptive Ophthalmy.**a* Rubeolous Ophthalmy—

Is generally of a catarrhal kind.

β Scarlatinous Ophthalmy—

Is more severe, but less frequent than the last variety.

γ Erysipelatous Ophthalmy—

Most common in cachectic subjects; it is very severe.

δ Variolous Ophthalmy—

Very severe. When the globe of the eye is affected there is a sense of dryness, stiffness, and sand in the eye, with pain in the ball, aggravated by light, and accompanied with increased flow of tears.

2.—Catarrho-rheumatic Ophthalmy—

Has both the symptoms of conjunctivitis and scleritis, viz., stiffness, dryness, and sense of dust or sand in the eye, intolerance of light, and deep-seated pain.

3.—Scleritis—

The enlarged vessels run in nearly straight lines from behind forwards, and have a *pink*, rose-red, or almost violet hue; the redness begins on the front of the globe, forming a *red zone* around the cornea. There is considerable intolerance of light and deep-seated pain, increased by heat, and usually worse at night. Increased lachrymation.

4.—Corneitis.

In slight attacks there is merely a little irritation on motion; but in more severe cases the cornea is surrounded by a pink zone, is minutely injected, and dull, turbid, or cloudy.

5.—Iritis.

There are fine vessels running in radia to the edge of the cornea; the iris changes its colour; the pupil is contracted, irregular, and immovable; lymph is effused. The pupillary edge of the iris is first attacked.

6.—Retinitis and Choroiditis.

Inflammation may commence in the retina or choroid, but cannot long remain confined to either. There is severe deep-seated pain of the eye, impaired vision, and contracted pupil; a sense of heat, but not much internal redness.

7.—Ophthalmitis.

Inflammation of the whole eye is rare, and generally from severe injury. There is a sense of

tension, and a feeling as if the eye were too large for the orbit; together with all the other signs of severe inflammation of the various tissues of the eye.

ANALYTICAL TABLE.

Inflammation of the Eye, (i. e., pain, redness, pyrexia, &c.)	} Ophthalmia.
Redness shifting, scarlet, and forming a net work	
Mild	<i>a</i> Catarrhal.
Severe	<i>b</i> Purulent.
	<i>α</i> Of Infants.
	<i>β</i> Of Adults.
	<i>γ</i> Gonorrhœal.
	<i>δ</i> Pustular.
Phlyctenulæ or Pustules	<i>c</i> Scrofulous.
Great intolerance of light	<i>d</i> Scrofulous.
Occurring during eruptive fevers	<i>e</i> Eruptive.
	<i>α</i> Rubeolous.
	<i>β</i> Scarlatinous.
	<i>γ</i> Erysipelatous.
	<i>δ</i> Variolous.
Sense of dust or sand in the eye, and deep-seated pain	} 2. Catarrho-rheumatic Ophthalmia.
Redness of a <i>pink</i> hue, and radiating	
Cornea minutely injected and dull	3. Scleritis.
Colour of Iris changed, and pupils irregular and contracted	4. Corneitis.
Severe deep-seated pain, sense of heat, and but slight redness	5. Iritis.
A sense of bursting, tension, &c.	6. Retinitis and Choroiditis.
	7. Ophthalmitis.

(To be continued.)

CASE OF UTERINE HÆMORRHAGE, IN WHICH GALVANISM WAS EMPLOYED.

By HENRY WILSON, Esq., Surgeon, Runcorn.

On the second instant I was requested to visit Alice Marsden, 34 years of age, married, and the mother of six children; in person tall and robust. I found her much reduced, with countenance blanched, and small weak pulse. She was believed to be about two months advanced in pregnancy. It appeared that she had experienced repeated attacks of uterine hæmorrhage during a week past, for which she had been under the care of a female quack, whose principal treatment consisted in the excessive administration of purgative medicine. A considerable discharge had occurred a short time before my visit. I directed eight grains of gallic acid, with as much compound cinnamon powder, to be given every two hours; a wet napkin to be placed upon the pubes and thighs, and a bandage round the abdomen, and her room to be kept cool and quiet.

After the lapse of about ten hours I was again summoned to her in haste. I found that during this interval a draining hæmorrhage had been constantly

* The term "exanthematous," generally used, should be restricted to patches of redness but the more general term "eruptive," may include pustules or any other cutaneous disease.

going on. At length a more considerable discharge of blood and coagula was followed by an alarming attack of *syncope* and *convulsions*, when I was immediately sent for. My patient was thought to be dead, as she lay motionless on the bed; pulse not perceptible at the wrist; extremities cold. Strong ammonia, however, applied to the nostrils, roused her; and shortly afterwards, having succeeded in giving two teaspoonfuls of aromatic spirit of ammonia, with some hot brandy-and-water, reaction was established. On examination the vagina was found hot, and the os uteri patulous, and very flaccid.

I now proceeded to inject the vagina with half a pint of cold water, and repeated the same process by rectum. The vagina was then plugged with a soft cambric handkerchief, and a full dose of ergot, with twenty minims of diluted sulphuric acid given. This dose was repeated at intervals of fifteen minutes, until six doses were taken, equivalent to three drachms of the ergot; in the meantime ammonia and brandy were almost constantly required to avert syncope. During three hours that I remained with my patient, her life appeared to depend on the assiduous administration of stimuli.

Having left the house for a short time, I found, on my return, that the *tampon* had been expelled, accompanied by a large quantity of blood and coagula; I decided not to reintroduce it, that I might repeat the injections of cold water. During the succeeding two hours these were administered several times, and they seemed, on each occasion, to check the discharge for a few minutes, but the vagina soon became hot again, and the discharge reappeared.

The case now appeared to be utterly hopeless. She could no longer swallow the brandy, and was only roused from a state of apparent insensibility, bordering on syncope, by the scarcely interrupted application of ammonia to the nares. The pulse had almost forsaken the wrist, being doubtfully perceptible; the eyes remained rigidly open, and fixed; in short, death seemed imminent. As a *dernier* resort, with but faint hopes of doing any good, I resolved to try galvanism, as suggested by Dr. Radford.

My residence being within a very short distance, I was enabled, in a few minutes, to have the apparatus in action at my patient's bed-side. A copper wire, coated with thread and sealing wax, with a ball of moistened sponge, about the size of a nut, fastened to one end of it, served for a vaginal conductor. The sponge was passed within the os uteri, and there retained. I previously ascertained that shocks could not be elicited from any part of the wire except from the sponge, at its extremity. The conductor from the other pole of the apparatus was then applied over various points of the sacrum and loins, and shocks, and continuous currents of the galvanic fluid transmitted through the parts intervening between these points and the sponge at the os uteri. Ten minutes elapsed ere the patient appeared sensible of the galvanic agency. The first indication of this was observed in her countenance, her glassy, corpse-like eye, brightening up with something of its wonted expression. In the course of ten minutes more, the pulse was more distinctly perceptible, and she complained of pain in the abdomen. After continuing the galvanic influence for a few minutes longer, the apparatus was withdrawn.

Though my patient's condition for several hours afterwards continued very critical, a decided improvement, in many respects, had undoubtedly taken place; the pulse increased in volume and power; she was enabled to take at intervals portions of a mixture of brandy and eggs; the vagina was found no longer above its natural temperature; the os uteri was distinctly less open; and the discharge had diminished to a mere "show." With the view of obviating the more immediate effects of so considerable a loss of blood, I now directed ten drops of Battley's sedative to be given every two hours. The effect of the first dose was perceptible in calming that extreme restlessness so peculiar to my patient's anæmic condition.

On visiting her the following morning, the 4th inst., I was gratified to find that she had passed a comfortable night, having had several hours of refreshing sleep. The hæmorrhage had not returned; *but, with the urine, a fleshy substance, about the size of a small fig, had been voided.* She, however, complained of intense pain of the head, with a sense of throbbing in it, synchronous with the action of the heart, which beat tumultuously. This I attributed, in some degree, to the brandy and beef tea which had been given to her too freely, thereby increasing reaction to a degree beyond what was desirable.

She continued to suffer from this symptom for several days, but in other respects her recovery has been progressive and satisfactory.

Remarks.—The announcement of galvanism, as an obstetric agent and remedy in uterine hæmorrhage, is calculated to arrest the attention of the practitioner, and to excite a hope that the expectations entertained of it may not, as in too many analogous instances, result in disappointment. It behoves us, however, to guard our judgment against any undue influence which such expectations may possibly produce; to beware lest "confounding sequence with consequence, the *post hoc* with the *propter hoc*," we commit the common error of patients, and others, in attributing the favourable issue of disease to the last remedy employed.

In a late article* on *quacks and impostors*, by the able editor of the *British and Foreign Medical Review*, referring to the utter incapacity of the majority even of educated persons to appreciate evidence as to matters of fact, the writer quotes some passages from Bacon, which may not inaptly be introduced here:—"The light of the understanding is not a dry or pure light, but drenched in the will and affections, and the intellect forms its knowledge accordingly; for what men desire should be true, they are most inclined to believe. When the mind is once pleased with certain things, it draws all others to consent and go along with them; and though the power and number of instances that make for the contrary are greater, yet it either attends not to them or despises them, or else removes and rejects them by a distinction, with a strong and pernicious prejudice to maintain the authority of its first choice unviolated." (*Novum Organon*.)

Cautioned by these wise words, I hesitate to refer the successful termination of the case above detailed to the employment of galvanism solely. Ignorant, as we confessedly are, of the *modus operandi* of medicinal

* *Athenæum*, Feb. 28, 1846. *British and Foreign Medical Review*, April, 1846.

substances, we know enough of the effects of gallic acid and ergot of rye on the fibrinous fluids and tissues of the body, and of the specific effects of the latter drug on the contractile fibres of the uterus, to affirm that they were wholly inoperative in this particular case; nor can we take upon ourselves to deny the possible correlative utility of the injections of cold water. Nevertheless, the revival of the patient whilst under the galvanic influence, the cessation of the hæmorrhage, and subsequent general improvement, are *facts* which, to say the least, justify and encourage more extended trials of the remedy.

Runcorn, April 8, 1846.

PROVINCIAL
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 WEDNESDAY, APRIL 29, 1846.

It is a curious feature of the times we live in, that every matter of a public nature, trivial or otherwise, must be made the subject of keen contest and agitation. There are questions of such clear and undeniable import, that when once attention is called to them, and sufficient evidence adduced, it might be thought no difference of opinion could take place,—that in short, nothing further was wanting to carry out the improvements which they suggest, than the necessary time and material for making arrangements, and bringing them to a satisfactory conclusion.

This, however, would not seem to be the case in any the smallest particular of what concerns the public. The agitation which has now for years disturbed, we had almost said, guided, the general policy of the country, makes its influence felt in matters with which party can have little in common, and into which it ought never to be suffered to intrude. No supposed evil, public or private, can now be hinted at without the exertions of an 'Abolition Society' being called to bear upon it; and what is far worse, when the evil is clearly and undeniably proved to exist, the exposure and attempt at its removal are sure to excite the contentious or interested feelings of some misguided persons, and an 'Anti-Abolition Society' immediately springs into existence.

Perhaps there are few subjects on which there is less room for disputation than the question of the interment of the dead within the precincts of large towns, and in densely inhabited localities. It is difficult to suppose that two enlightened individuals could be found, who would hold a difference of opinion on so self-evident a proposition, as that a burial ground, crowded with the accumulating decay of years of mortality, if situated in a confined and thickly populated neighbourhood, must prove a serious source of contamination to the atmosphere of the place.

It is absolutely impossible but that the emanations which take place from a soil, in great part formed of the dust of mortality, in every state of decay, must prove more or less injurious to all who live within the sphere of their influence. No fact is better ascertained in relation to the progress of epidemic or infectious diseases, than that to isolate the affected persons, to surround them with a sufficiency of space so as to admit of free ventilation; in other words, to dilute the poison, whatever that may be, is the most effective method to arrest its course, and avert its consequences. The converse of this ascertained fact is a natural sequence—that to crowd human beings together, and further to contaminate the atmosphere in which they are crowded, with such gaseous exhalations as the grave-yards of the metropolis, and of large towns generally, are continually pouring forth, must be a ready means of generating disease and facilitating its progress. The fact, moreover, admits of direct proof, and, mainly through the exertions of Mr. G. A. Walker, the intelligent author of "Gatherings from Grave-Yards," and other works of the same nature, has abundantly received it.

A Committee of the House of Commons, specially appointed to inquire into the subject, expressly state in their report to the House, that "after a long and patient investigation," they "cannot arrive at any other conclusion than that the nuisance of interments in large towns, and the injury arising to the health of the community from the practice, are fully proved."

The indecencies attendant upon such practice, the violation and exposure of the half-decayed remains, the breaking up of coffins, the scattering of their contents, the burnings which from time to time are had recourse to in some of these receptacles, for the purpose of making room for fresh interments, all of which abominations pass under the eyes of the surrounding population, are fraught with a moral contagion little less injurious to the minds of the recipients than the pestilential effluvia are to their bodies; and yet, in the face of all this, in despite of the opinions of the most competent authorities, in the very teeth of evidence, sifted by the searching examination of a parliamentary committee, and of facts declared by them "fully proved," individuals are to be found so deadened to moral feeling, or so miserably biassed by interested motives, as to band together for the maintenance, not merely of a particular nuisance of this description, but of the system itself.

Were the subject less serious, the evil less crying, the injury to the community less pressing, the satire which an agitation got up expressly to support these proceedings reflects on the guiding principles of the times, would be most ludicrous. It is, however, a