CASE OF INJURY TO THE BACK, WITH SUBSEQUENT ENLARGEMENT OF THE MAMMÆ AND WASTING OF THE TESTES.

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William R., aged 60, was admitted a patient at the North London Hospital, February 3rd, 1840, labouring under slight bronchitis, and at the same time presenting extreme enlargement of the mammæ, and wasting of the testes, apparently the result of an injury to the back. He was originally apprenticed to a fisherman; at the age of 21, went abroad as a sailor; was subsequently a labourer, and has lately been in Spain. From an early period of his life says he has been particularly devoted to the female sex, and at the age of 16, entered a club which was established at Rochester, for the purpose of enabling its members to obtain women in the most economical manner. At the age of 30 he married, but still continued somewhat gregarious in his habits; he had one child by his wife; her health, however, was extremely bad, and she died in two years. Six months after her death, he again married, and had two children. He states, however, that he was seldom ever able to perform his matrimonial duties at home, in consequence of his wife generally coming home late, and tired, from washing, and hence occasionally performed them elsewhere.

About two years and a half ago, he left England, and enlisted in the service of the Queen of Spain, in consequence of having been discovered by his wife in a "faux pas" with another woman. On the 30th of August, being pursued by Don Carlos, after a skirmish, he had to cross a trench that lay in his way, and in attempting to leap it, he fell with his chest against the edge of its opposite side. The concussion he sustained was so great, that he fell upon his back to the bottom, a distance of ten feet, and received a blow upon his loins, and another upon his neck over the second cervical vertebra. He remained insensible about four hours, during which time he received some slight injuries on the back of his head from the enemy; and then made his way to the hospital. Three days after this accident he felt great pain, of an aching throbbing character, in his mammæ, which became red and enlarged; continuing to do so for about a month. Five weeks after the accident, he felt severe darting pains from the lumbar region in the direction of the cord to the testicles. The testicles now felt hot and painful, and from this time continued gradually to waste; his voice soon after became altered, and more feminine; his beard grew softer, and he mentioned that an alteration took place in the back of his head.

His mammæ now are extremely enlarged, pendulous, heavy, and somewhat knotted; the nipple is surrounded by an areola, of about the breadth of an inch, but faintly coloured; the breast has no appearance of containing milk, even by applying a cupping glass; the right testicle has almost totally disappeared, and the left is about half its natural size. Previously to the accident, he possessed perfect virility, but has subsequently lost all power of sexual intercourse, and has not even had an erection. On one occasion he attempted connexion with a woman, but discovered it was "no go."

For the bronchitis he was ordered half a grain of opium twice a day, and had an expectorant mixture,

to be taken occasionally.

Feb. 11th. Left the hospital at his own request, the bronchitis being considerably relieved.

Dimensions of Mammæ.

Circumference at base	14 inches.
Length transversely	7 "
Length vertically	6 "

Dimensions of Head.

Horizontal circumference	22½ inches.
Between summit of each ear vertically	11 "
Between upper and anterior part of each ear posteriorly	10½ "
Between lobes of each ear posteriorly	9 "

April, 1846.

ON DISEASES OF THE EYE.

(Continued from page 193.)

DIVISION I.—CLASS II.

Effects of Inflammation.

1.—Opacities and Specks on the Cornea.

a Nebula, (a cloud,) is the slightest degree, and presents a diffused cloudiness.

b. c. Albugo, (albus, white,) and leucoma, (λευκος, white,) are more complete; the former from inflammation, &c.,—the latter from wound.

2.—Staphyloma, (σταφυλη, a bunch of grapes,) any protrusion or projection on the front of the eye.

The cornea becomes opaque and forms a whitish or bluish tumour. It may be either partial or total.

3.—Ulcer of the Cornea.

Has a pale ash colour, high irregular edges, and is surrounded by a cloudiness of the cornea. It is disposed to spread.

4.—Onyx, (ονυξ, the nail.)

Abscess of the cornea is semilunar, and generally situated on its lower edge. It remains fixed though the head is moved.

5.—Hypopyon, (υπο, under; πυον, pus.)

Effusion of pus into the chamber of the aqueous humour. It often shifts its position.

6.—Synechia, (συν, together; χημ, to hold.)

Adhesion of the iris; this may be either to the cornea or lens,—anterior or posterior.

7.—Prolapsus of the Iris, (prolabor, to fall forward.) Syn. Staphyloma racemosum.

Protrusion of the iris through a wound or ulcerating opening in the cornea. The pupil deviates towards the seat of the prolapsus.

8.—Closure of the Pupil.

The iris becomes motionless and appears radiated and wrinkled.

9.—Hydrophthalmia, (υδωρ, water; οφθαλμος, the eye.)

Dropsy of the eye. It is generally unconnected with other forms of dropsy.

a Dropsy of the Chambers of the eye. Great prominence of the cornea, &c.; at first the eye is far-sighted.