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TABLE OF DISEASES TREATED BETWEEN THE 24TH OF FEBRUARY, 1843, AND THE 31st OF JANUARY, 1846.

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The cases placed under the head "Climacteric Disorder," consisted of all those general and local derangements incidental to the disappearance or cessation of the periodical function of the uterus. Of these, three only require notice at present, viz., *neuralgia*, *menorrhagia*, and *leucorrhœa*.

The first, from experience, I am inclined to believe of very common occurrence, and from its liability to be confounded with more serious disease of the organ, it deserves particular consideration, as by its correct diagnosis a great deal of physical suffering and mental anxiety may be avoided. For this purpose it is absolutely necessary to subject the patient to special examination; in no case, however, have I found it requisite to resort to that much abused, though invaluable instrument, the speculum, the simple and ordinary manual examination having invariably proved adequate to the exigency. The great source of fallacy has appeared to me to consist in the character of the pain, which in many instances has borne the most close resemblance to that of scirrhus disease, being acute and lancinating, and frequently attended by considerable sense of heat in the parts; it also extended to the back, and was accompanied by the dragging sensation so very common in the latter case. The peculiar *central pain* on sitting was, however, rarely present. On examination, the os and cervix were found free from induration or hardness, but not uncommonly presented some degree of tumefaction.

The treatment comprised alteratives, gentle aperients, colchicum, and anodynes, with the warm or hip-bath. In some cases, in which the internal pain was very severe, the greatest relief was derived from the employment of a solution of the extract of conium, used warm.

Menorrhagia calls for notice only so far as the treatment is concerned, which was varied according to the general constitution of the patient, more especially as regards the presence of anæmia, or hyperæmia. In both cases it may be properly divided into two parts—that during the attack, and that in the intervals between the attacks of hæmorrhage. In both cases the ergot of rye proved infinitely superior to any other means of diminishing or arresting the flow of blood, and most fully realised the confidence which for many

years I have reposed in it, being altogether free from the objections which exist both to the acetate of lead with opium, and the alum, neither of which medicines do I now use in such cases. It is only necessary to state, that the treatment during the intervals consisted, in the one case in improving to the utmost the vigour of the system, by tonics, chalybeates, cold bathing, exercise in the open air, and a nutritious diet, with wine, or malt liquor; whilst, in the opposite state, plethora was lessened by the indirect and gradual depletion effected by the continued use of cathartics, a carefully restricted and cool diet, exercise, and occasionally cold bathing where the plethoric state was removed. In no case was general bloodletting employed; which practice, however immediately beneficial, I consider, except in some very urgent cases, not only of no real utility, but, on the contrary, most decidedly and ultimately injurious, by increasing the evil which it was intended to remove.

Leucorrhœa was of frequent occurrence at this period of life, and was found to depend on the usual causes, both as regards the uterus and system at large; such causes calling for a corresponding deviation from any general plan of treatment. When connected with inflammation of the uterus, leeches to the groins were used with decided advantage, and the conium injection both relieved the concomitant pain, and also permanently lessened the inflammatory action. Astringent injections were most studiously avoided, even where relaxation alone existed, the only one employed at all being the decoction of oak bark, to which the conium was frequently added. Many of the cases had been aggravated by the employment of the preparations of lead and zinc, previous to my being consulted. In these cases, as in menorrhagia, the ergot of rye, in fifteen-grain doses, with carbonate of soda, proved signally useful in restraining the discharge. One circumstance connected with the ergot in menorrhagia requires to be mentioned,—it is the supervention of well-marked symptoms of peritoneal inflammation where the discharge was suddenly and totally suppressed. How far this is to be attributed to the mere cessation of the hæmorrhage, or to the peculiar action of the ergot, I am not prepared to decide, but certainly think that the latter may have enacted a principal part in the production of the symptoms. In one case, where the hæmorrhage was very severe, and suddenly ceased after a drachm of the ergot, in scruple doses, had been taken, the inflammation ran high, evidently commencing in the uterine membrane, and diffusing itself over that of the abdomen, for which the most active

treatment was required, and the woman had a very narrow escape. If the views of M. Mialhe on the action of the ergot be, as I in a great measure regard them, correct, there can be little doubt that the ergot alone might lead to such consequences.

The diseases of the uterus and ovaria are by far too important to justify a mere cursory notice, and must therefore be reserved for future and more careful consideration than can now be bestowed on them.

In the table are marked nine cases, under the title of *Vaginitis* and *Ulcers of the Vagina*. These cases are interesting from the period of life at which they occurred, and also from their great importance in a medico-legal point of view.

The cases presented themselves in two forms,—the one resembling simple though severe inflammatory gonorrhœa; the other syphilitic and even phagedenic ulceration of the parts. They occurred in *young children*, from the age of six months to that of seven years, and in three or four instances threatened life itself. But for the attention which many years ago I devoted to the subject, as a lecturer on medical jurisprudence, and the fact of numerous instances of the disease occurring about the same time, and in a particular locality, it is more than probable, that the most erroneous opinion might have been formed as to the real nature and origin of these cases. It is now, however, consistent with my own personal experience, to verify what is stated in Dr. Ryan's Manual of Medical Jurisprudence, and to affirm, that at the time when the cases were met with by me, many others existed, some of which terminated fatally, under the combined influence of sloughing and constitutional disorder, consequent on the local affection; in fact, the cases were sufficiently numerous to warrant the idea of their origin in some peculiar or epidemic cause, and so far confined to one locality, as to give to them something of an endemic character. Their medico-legal interest depends on their connection with the subject of VIOLATION, for the effects of which they have been mistaken, thereby unjustly jeopardising life, or at all events leading to unfounded charges against the innocent. In support of this statement, I might adduce cases, but such proceedings is out of place at present. I will now therefore merely state, that, in those cases in which the disease partook of the character of gonorrhœa, the vinum opii, in the form of lotion and ointment, applied to the parts, was the most effectual local application; and aided by small doses of the hydrargyrum cum creta and antimonial powder, soon accomplished a cure. In the more severe and ulcerative disease, the creosote ointment acted most beneficially; not only promoting the separation of the sloughs, but also exciting healthy action in the subjacent parts: under the employment of this remedy, and the internal exhibition of the alterative above mentioned, all the cases did well.

Two other cases recorded in the table may be briefly alluded to,—not as possessing any *pathological* interest, but as being certainly of very rare occurrence: they are those placed under the term "Premature menstruation." In one of them, the child was under the age of five years, and the discharge had appeared three or four times with the most perfect regularity. The health of the child seemed unimpaired, in

consequence of which, I simply advised sea-bathing, good diet, and strict attention to the bowels. In the other the child was under nine years of age, and had experienced several natural and well-marked periods. In this case, the appearance of the child indicated a more advanced age, but, no doubt, whatever existed as to the veracity of the parent: a similar course was recommended in this case, as the health was in no wise impaired.

There is yet another affection which in the table has been placed with nervous affections, and which may now be very briefly noticed, as from the excellent observations made in a recent lecture by my former friend and fellow-graduate, Dr. Favell, it is unnecessary to dilate upon it. I allude to "Spinal irritation." In the view taken by Dr. Favell I mainly concur, but am also inclined to believe, that in many cases of the disease it is less essentially inflammatory in its nature than he considers it, and more dependent on mere morbid sensibility. My reason for this opinion is, that in several instances, even where pain has been exquisite and increased on the slightest pressure, the most speedy and permanent relief has been obtained without the intervention of either local depletion, or counter-irritation, but from a very opposite plan—viz., the use of sedative applications, either in the form of plasters or embrocations, and the internal exhibition of assafoetida and valerian, more especially where the affection was at all connected with any menstrual irregularity. This form of the affection is also of frequent occurrence during the period of gestation, of which my own practice has afforded me many instances. My object in making these remarks is not at all to contravene the opinions of Dr. Favell, in which, so far as the inflammatory form of the disease is concerned, I entirely concur, but merely to state my conviction, that in this as in most other diseases, similar symptoms may and do arise from very opposite pathological conditions, and consequently, no general nor systematic plan of cure can be relied on, as generally applicable.

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(To be continued.)

MEMOIR ON THE DIGESTION AND THE ASSIMILATION OF AMYLACEOUS AND SACCHARINE MATTERS.

By Dr. MIALHE, Professor Agrégé at the Faculty of Medicine, Paris.

(Continued from page 346.)

CONCLUSIONS AND COLLARIES.

The facts newly acquired to science on the digestion and assimilation of amylaceous matters, permit us to establish as a principle, that the same chemical reactions preside over the great phenomena of nutrition, both in plants and in animals.

In plants the starch contained in the organs, can only serve for nutrition after having been rendered soluble by the influence of a special ferment—diastase; and what is remarkable, when the physiological distribution of this ferment is first examined, is, that it exists only in feculiferous seeds, near the germs, and not in the radicals; that it is neither developed in the roots nor in the shoots of the potatoe, but only in the tubercles.