

He states that it has been seen and approved of by several of the most eminent members of the profession in the metropolis, whose names are mentioned in the communication we have received on the subject.

*On the Employment of Sudorifics in Combating Disease.*

A CORRESPONDENT at Woolwich communicates to us his objections to the use of James's powder, and also to "the very system itself of sudorifics in disease. I believe (he says) that practice a remnant of by-gone physiology in therapeutics, which occupies itself with forcing perspiration under morbid conditions of the system; and that it is worthy to stand on the same plane with that notion of chlorotic and anæmorrhœal affections which teaches that they are to be combated by the farrago of deobstruents, from savine to electricity."

The writer quotes the following passages:—

"I venture to lay down (says Dr. Holland) the following positions, as founded on sufficient evidence. First, that it is more reasonable, as well as beneficial in practice, to have regard to the changes in the circulation producing diaphoresis, than to the action of sweating itself. And, secondly, that the amount of perspiration is rarely a just measure of the good obtained; and that to make this a primary object, is likely to give a wrong and injurious bias to the treatment of disease."—(Vide Holland on "Sudorific Medicines," page 68; "Holland's Medical Notes and Reflections.")

"My own experience (says Dr. Holland) suggests the conclusion which has occurred to others, that the antimonial powder of our Pharmacopœia is perfectly inert in any ordinary dose; and that the original James's powder has held a reputation barely justified by any method of its use; certainly not by the trifling quantities in which it is now given."—("Medical Notes and Reflections," article Antimonial Medicines, page 560.)

"Dr. Elliotson, many years ago, (that is, when one might quote his opinion without discredit,) advanced similar views in connexion with the worthlessness of James's and the antimonial powder. The tartarized antimony, as Dr. Holland well observes, is capable of performing every end which antimony can be employed for; and this 'far more largely, and with much greater certainty,' than any preparation of the mineral."

But "how unphilosophical, is it not, to address remedies directly to the skin as the chief seat of fever?"

*On the Employment of Cod-liver Oil in Scrofulous and Rheumatic Affections.*

By EDWARD CAREY, M.D., Guernsey.

DR. CAREY, who considers cod-liver oil as amongst the most valuable analeptic agents, remarks,—

"Since its first introduction, in 1771, by Percival, as a remedy in chronic rheumatism, its use has been principally confined to the hospital in Manchester, where it appears that large quantities have been for many years consumed annually. On the Continent, however, it has been more universally adopted; its chemical analyses accurately ascertained, and its virtues lauded by numerous authors. Schenk, amongst others, considers it as much a specific in rheumatism, gouty and scrofulous affections, as quinine in intermittent fever, or mercury in syphilis.

"Besides the animal matter which it contains, its virtues would appear to be derived, not from the iodine, as is generally supposed, which exists but in a very minute proportion, but from the quantity of phosphorus, sulphur, and other earthy salts, which it holds either free or in combination. The fact that the phosphates are passed in the urine of scrofulous individuals to an extent many times greater than natural would bear out this assumption.

"Its immediate action on the stomach and bowels produces increased appetite, the proper assimilation of the food, and improved colour of the evacuations. The skin from being arid burning or cold becomes warm and perspirable, and the health and strength, after some perseverance in the use of the oil, gradually improves."

Dr. De Jough, of the Hague, has, in a work on the subject, given an elaborate analysis of the three kinds of cod-liver oil, (which we regret that a want of space prevents us from here reproducing.) The same practitioner gives tables of six cases, each treated with the brown, the whitish-brown, and the white oil; and he adds,—

"From this it will be seen that the cures with the brown-coloured oil were effected, on an average, in half the time that was required with the two other kinds. This might have been attributed to accidental circumstances, if only one

patient had been treated with each kind; but in each list of cases the six patients were indiscriminately taken; in fact, we treated the first six patients who presented themselves with the brown, the next six with the whitish-brown, and the last with the white."

Dr. Carey reports the two following cases, illustrative of the curative properties of this remedy:—

*"Curvature of the Spine, with Paralysis of the Lower Extremities.*

"CASE 1.—Mary P.—, aged six, born of unhealthy parents, of scrofulous diathesis, and with enlarged abdomen, emaciated appearance, and swelling of the glands of the neck; had been affected since birth with curvature of the spine and paralysis of the lower extremities. In the lumbar region, the natural bend of the spine forwards was increased so much beyond its proper axis, that the spinous processes could not be felt. The lower extremities, attenuated to the smallest size, hung powerless from the pelvis, which was thrown backwards. The whole osseous system was deformed; the sternum thrown forwards; the clavicle bent to right angles; the muscles of the back were sufficiently developed to support the erect posture when seated. The vital powers were much depressed; cold, shrunken skin; tongue furred; bowels irregular. The secretions having been corrected with mercury and chalk, the use of the oil was commenced by one tablespoonful three times a day, nourishing diet, and tepid salt-water baths three times a week. At the end of a month the general health was visibly improved; the power of motion was gradually restored to the extremities, and she began to crawl. At the end of three months she stood at the bedside, and at the expiration of six months she walked alone. She continued improving under the use of the oil until she was able to run about, and enjoy the perfect use of her limbs. The spine remains still somewhat incurvated forwards.

"CASE 2.—D. G.—, aged nine months; born of scrofulous parents; a rickety, strumous child; large head; fontanelles open and large; tumid belly; dark hair and eyes; the spine was distorted; the sternum and clavicles were thrown forwards; the bones of the frame soft and yielding. At this early age he was subject to periodical attacks of dyspnoea, resembling spasmodic asthma, occurring every fortnight, and ceasing after some hours' duration. The respiratory murmur in the intervals was normal, though the breathing was somewhat quicker than natural. Three former children of the same parents had been similarly affected, and had died young. A course of iodine and hydriodate of potash had been persevered in for three months without any visible alteration in the general health, or alleviation of the distressed breathing, nor had the infant acquired the least power over his limbs. The oil was prescribed, when he was a year old, in doses of a teaspoonful three times a day, increasing it gradually to a desert-spoonful. After the first month, the attacks of dyspnoea became less frequent; at the end of the third they had ceased; the general health rapidly improved, limbs acquired strength, and he became a stout, robust child. He is now nine years old, and has enjoyed average good health since the above-named period.

*A New Shield for Sore Nipples.*

By ST. JOHN W. LUCAS, Esq., M.R.C.S. &c., Louth, Lincolnshire.

"In the treatment of sore nipples I have found great advantage from the use of a very simple shield. It is made of tissue or silver paper, three and a half or four inches square, rubbed over on one side with some unctuous substance. This is placed over the nipple, and readily adheres to the breast; the few folds are then flattened, and laid in any direction so as to avoid the sorest parts.

"I generally use the fat of the deer or calf, which in this part of the country is called 'trundle.' The fat should be well rubbed in with the finger; it is not necessary that the paper should be more than thinly coated over.

"After the infant has been suckled, a fresh paper is usually required; but the cheapness of the application, and the rapidity with which the papers can be made by the attendant nurse, remove any obstacle this might seem to present to their adoption. The paper not only protects the nipple from being rubbed by the linen or clothes, but is so light as scarcely to be felt; it adheres sufficiently to be retained without any kind of support, is easily applied, and costs a mere trifle.

"It is occasionally desirable to medicate the papers: in many cases, the use of arnica montana (in the proportion of ten minims of the tincture to the ounce of fat) has been attended with the best results.