

The main objects in the treatment of these cases appear to be the maintenance of a moderate and uniform pressure over the diseased part, and, as far as possible, to exclude it from the air. Now, collodion possesses the necessary qualities in an eminent degree, and appears to me to deserve more extensive use than it has hitherto received. The application is cleanly, very easily made, and, if carefully done, gives scarcely any pain. In the case I have related there was, moreover, a far less offensive smell from the wound than is usually met with; but whether that was to be attributed to the remedy employed, or to the nature of the case, I am unable to say.

There are one or two practical points which ought to be mentioned. At first, when the collodion is applied, there is a profuse discharge of pus, which makes its way out at some part of the surface, and so loosens the covering. In then becomes necessary to apply some fresh collodion every day or every alternate day, the application being made less and less frequently as the discharge ceases. In putting on a fresh layer it is very essential to remove carefully the previous one, and apply the collodion quickly and thickly to the granulating surface. It should be left exposed to the air.

Sheffield General Infirmary, Feb. 1864.

## A Mirror

### OF THE PRACTICE OF MEDICINE AND SURGERY IN THE HOSPITALS OF LONDON.

Nulla autem est alia pro certo noscendi via, nisi quamplurimas et morborum, et dissectionum historias, tum aliorum, tum proprias collectas habere, et inter se comparare.—MORGAGNI *De Sed. et Caus. Morb.*, lib. iv. Proœmium.

#### GUY'S HOSPITAL.

##### ADDISON'S DISEASE OF THE SUPRA-RENAL CAPSULES, WITH CHARACTERISTIC MELASMA; FATAL RESULT; AUTOPSY.

(Under the care of Dr. HABERSHON.)

THE disease which now goes by the name of Addison is one of the identity of which no physician who has had any opportunity of investigating its clinical history can have the smallest doubt. We have been shown examples as they presented themselves to observation, in which the melasma was distinctly seen, attended by the usual symptoms described by Addison himself as peculiar to the malady, and in which, when life has ended, no other morbid lesion was found than the disease of the supra-renal bodies, invariably met with as a yellow or grey amorphous material, not unlike tuberculous deposit, but generally, for the most part, distinctive of the affection. The error that some have fallen into regarding this interesting malady is the connecting of every case of disease of the supra-renal capsules, whether cancer or otherwise, with that described by Addison; and as there has been no discoloration of the skin, *ergo* Addison's disease must be a myth. It would be as unphilosophical to say that Bright's disease has no existence because other diseases produce albuminuria, or because there are other affections of the kidney not attended by albuminous urine. It is hardly fair in the general argument for anyone to investigate such a disease as Addison's in the solitude of his closet; he must go forth, and study it under those who are quite capable of pointing it out when present, and who would explain the difference between a genuine and a spurious supra-renal melasma. Truth will ultimately prevail, no matter what opposition it may at first meet with; and we have no doubt that in time those who are now sceptical, or who consider the disease exploded, will change their opinions and views regarding its identity. We have no other wish than to uphold any well-established and scientific truth; we say well-established, because Addison's disease is so in the minds of those who have seen genuine instances of it. The following example is one in

illustration; a more marked case could not have been selected. All the symptoms pointed out the nature of the affection; its diagnosis during life was clear and unmistakable, and when death closed the scene, no other organs were found involved than the supra-renal capsules. We heard Dr. Habershon remark, that this case would have made a convert of the most sceptical if they had seen the patient before and after death. We sometimes see jaundice occur without anything to account for it being found after death; and would it be rational to argue, that because no post-mortem explanation was offered for the jaundice, it had nothing to do with the functions of the liver. The frequent publication of well-marked examples of Addison's disease will do much to help in establishing its existence on a firm basis, one that will stand the test of time.

Edward G—, aged eighteen years, was admitted Sept. 10th, 1863, into Philip ward. He was a bookbinder, living at Islington. Said that about a year ago his friends observed that his complexion was getting dark, but he himself felt well at the time, and was at work at his usual employment. About Christmas, 1862, he had an abscess in the neck, which made him feel ill; it soon completely healed, but he had not been well since. He had been getting weaker and thinner, but not uniformly, as he had been obliged to lay up three times, and afterwards was able to resume his employment. Had sometimes been sick; his complexion became dingy, and his skin had gradually been getting darker. On these three occasions he was laid up for a week or two at a time, with excessive weakness. At the beginning of August he was obliged to desist from work altogether, and had been unable to do anything since. His appetite continued good. Never had any pain in the back; knew of no consumption in his family.

On admission his appearance was very striking. The colour of his skin was of a deep bronze or olive-brown. The discoloration was not excessive or uniform, but yet very well marked; there were darker, almost black, marks round the neck, but no patches nor pigment on the lips or on the mucous membrane. (He was much the colour of some Peruvians then in the hospital.) His only symptoms were those of prostration; he was too weak to rise from bed, and if he attempted to do so he was sick. His pulse was 84, and very feeble. He was spare, but not at all wasted; his mind was clear; respiration feeble; no cough; appetite good. He gradually got feebler, and in the last week of his life his prostration was excessive. His abdomen was contracted. As he lay in bed he did not seem so excessively ill; at the same time his pulse was quite imperceptible. There was no vomiting; the bowels were regular, and urine healthy. Irritability of the stomach came on, and was with difficulty checked; his prostration increased, and he died on the 28th of September.

*Autopsy, twenty-four hours after death.*—The heart was small, but healthy. The lungs were healthy, with the exception of one or two iron-grey, dense, but small, lobules at the right apex. There was no disease of the liver, spleen, kidneys, or intestines. The supra-renal capsules were the only structures in the body presenting any marked disease; in them there was scarcely any healthy structure left. The left one was enlarged, and infiltrated with low-organized product, partly calcareous; the right was similarly affected, but in a less degree. The left capsule encroached upon the branches of the semi-lunar ganglion, several of the large branches of the ganglion being involved. There was no ulceration of the stomach, nor disease of the mesenteric or lymphatic glands.

#### ST. MARY'S HOSPITAL.

##### CASE OF PURPURA HÆMORRHAGICA, WITH EXTENSIVE HÆMORRHAGE FROM THE GUMS AND TONGUE; FATAL RESULT.

(Under the care of Dr. CHAMBERS.)

THE following notes were kindly furnished by Mr. J. N. Moore, house-surgeon:—

John K—, aged thirty-five, labourer, was taken suddenly ill whilst at tea on the evening of Jan. 29th, 1864, with severe hæmorrhage from the mouth and tongue. This bleeding rapidly and persistently increased, and became very profuse, so much so that a medical practitioner was called in, who used various styptics &c. with a view to arrest it. All attempts failing, he was sent to the above hospital on the evening of Feb. 1st. On admission he was in a very feeble condition, and stated that he had lost nearly a gallon of blood since he was first taken ill; and, indeed, the bleeding was very copious, for on each of the first two days that he was in the hospital there was nearly a