

are of unquestionable utility. This exercise should be progressive; if undertaken too soon, it induces pain and fatigue, which are always injurious; if neglected, it retards the complete reestablishment of the strength, and consequently the cure.

Sea-bathing and Hydrotherapy.—I have elsewhere said, speaking of cold baths, sea-bathing, and hydrotherapy, "River-bathing, when aided by the exercise of swimming, is useful, but the efficacy of sea-bathing, when it is well borne, is more constant, and greater. In order to effect diaphoresis, in difficult cases, I have sometimes employed hydrotherapy, but a constant supervision must be exercised over patients in the application of this method, which, if carelessly employed, might cause serious accidents; but which, wisely directed, and aided by a prudent regimen, has afforded me, and may afford others, excellent results."

Of course, the regimen should be discontinued gradually, and not until the sugar has disappeared from the urine. It is then advisable to increase the quality and quantity of combustible aliments. Good Normandy butter in sufficient quantity with each meal, and three or four tablespoonfuls of cod-liver oil, are aliments upon the employment of which I always insist, during the use of sea-bathing or of hydrotherapy. More caloric is expended, and in order that the resources of the economy should not be overtaxed, the supply, by means of a calorifying diet, must at least equal the loss. In fine, the indications and counter-indications of hydrotherapy and sea-bathing in glucosuria may thus be stated: When the sugar disappears in the urine, or diminishes, when the feculæ can be more largely assimilated, and when there is a daily gain of strength, hydrotherapy and sea-bathing constitute, with exercise, one of the most efficacious means to be employed in glucosuria. When, on the other hand, the sugar increases, and the strength diminishes under these influences, the system being unable to contend against them, these measures increase the difficulty by subtracting caloric from the system, which consequently fails. The remedy is therefore a new evil superadded to that which already existed.

VEGETATIONS OF THE GENITAL ORGANS—CHROMIC ACID.

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BY O. D. PALMER, M.D., ZELIENOPLE, PA.

CASE.—C., 23 years of age, of a good constitution, never having been diseased, became pregnant for the first time toward the end of October, 1856. About the same time she was taken with an abundant blennorrhagic discharge. Having arrived at the fourth month of gestation, she experienced a sense of heat and suffering in the genital organs. This painful sensation was produced by the presence of numerous prominences in the vagina, which

had replaced the very copious and extremely foetid purulent discharge. Careful cleanliness, injections, and baths, procured no ease. Two months passed, during which the disease was making rapid progress.

C. presented herself at the hospital, where she was admitted on the 30th of April, in the sixth month of her pregnancy. It was ascertained that over the labia majora and minora, the vaginal canal, and even the cervix uteri, was a growth of excrescences of considerable size, and in great number. The most voluminous, as large as the fist, projected outside of the vagina. Of these vegetations some were with pedicles, others were sessile; their tints were reddish, their appearance vascular. They were for the most part divided and subdivided, forming ramifications, which in their aspect offered some analogy to the corymb of the millifolium. In the vagina these excrescences had acquired such dimensions, such a development, as to fill all the cavity, and not to permit, without the greatest difficulty, the introduction of the speculum.

In searching for the cause of these vegetations, it was impossible to recognize for them a syphilitic origin. The woman had never had chancres. An attentive examination of the genital parts did not discover any ulceration. There existed no engorgement of the inguinal or sub-occipital glands, no squamous eruption.

In such a state of things we could not but foresee great difficulty at the time of accouchement. It was, then, very important to find means to destroy this obstacle. For this end, M. Rousset applied, first, crayons of nitrate of silver, then the nitric oxide of mercury. This last means, continued during twenty-five days, with much care, caused very smart pain. Like the preceding, it was not followed by any advantageous effects. Tincture of iodine had no good result.

On the 6th of July, after all these failures, Prof. Rousset had recourse to the use of *chromic acid*. He made application of a solution prepared as follows: R. Chromic acid, 1 part; aquæ distil., 3 parts. By the employment of a pencil, each excrescence was separately washed with this liquid, having care not to touch the mucous membrane that surrounded it. The patient experienced immediately, in the part touched by the solution, a sensation of smarting and pain, which was calmed again directly. Redness was manifested, a little swelling, in short a slight inflammation, which was terminated by the formation of pus. Some few washings with Goulard's water, and the use of dry lint, constituted the whole treatment. In proportion as suppuration was established, the excrescences were detached, disappearing, and leaving in their place a reddish surface, in some points excoriated, in others ulcerated, very superficially. The cicatrization was regularly and uniformly established.

July 20th, the cure was complete; the cervix uteri, the labia majora and minora, and the vagina, were entirely freed from these

adventitious productions, and offered an aspect which was altogether normal.

On the 26th, accouchement took place without any accident. The child, of the masculine gender, was perfectly formed, and afforded no traces on its body that could cause the mother to be suspected of any affection of a specific nature.

The chromic acid has been extolled, these few years past, as a caustic, both by Dr. Keller, of Germany, and by Dr. Marshall, of London, for destroying vegetations developed on the genital parts. Dr. Marshall uses the acid in solution. Dr. Keller applies it in the form of paste. Whatever process is adopted, this caustic is easily managed; its action is at the same time very rapid, little painful, and thorough. We have a right to conclude, then, from this case, that in these excrescences the chromic acid is a powerful caustic, and preferable to others that have been hitherto employed.—CAUSSADE, of the School of Bordeaux.

CASES OF SUPPRESSION OF URINE.

BY JAMES ALEXANDER, ESQ., SURGEON, WOOLER.

THE pathology of the disease, described by our older writers under the name of ischuria renalis, is little known, and the disease itself is a very rare one. Dr. Abercrombie treats of suppression of urine as resulting sometimes from disease of the kidney itself; sometimes from disease, generally inflammatory, of some adjacent organ; and only very occasionally as proceeding from some unknown cause affecting the nerves of the organ, and leaving few or no morbid traces after death. The same view, substantially, is taken by recent systematic writers; with a strong inclination, perhaps, to refer all, or almost all, cases of suppression to some stage or modification of granular disease of the kidney. I cannot pretend to throw any light on the intimate nature of the disease; nor have I the means of going into the literature of it. But, perhaps, the two following cases, which occurred to me very recently, may possess sufficient interest to deserve being recorded in the *Edinburgh Medical Journal*—

On the 13th February last, I was requested to visit a shepherd lad, aged 16, residing about seven miles from Wooler, who appeared to be laboring under the symptoms of ordinary continued fever, which his friends imagined had been brought on by cold and exposure to wet. He had been ill about ten days. His pulse was about 100; his tongue loaded, and his throat slightly inflamed and painful; he complained of headache, but had little delirium; there was a good deal of restlessness, and his urine was scanty and high-colored; there was no cutaneous eruption. He was ordered some mild aperient, his diet carefully regulated, and, as his pulse was weak, a small quantity of wine was directed to be taken at intervals. On the 15th, the symptoms were nearly the same,