he has omitted the oil, was nine weeks, during which he lost ten pounds' weight, but on resuming it, he gained three quarters of a pound in weight every week for a considerable period. He writes, "I sometimes give the stomach a rest from the oil for a fortnight, but whatever diet I then take there is a falling off. When I have a false appetite an hour after a meal, a good dose of oil upon ginger wine fails not to remove it." He adds, "I get the oil both pure and cheap. Mr. H., my surgeon, provides it, and a benevolent lady, Mrs. B., pays the bill." Is not this one of the best kinds of self-supporting dispensary?

ON A CASE OF TETANUS.

By H. PARKER LAURENCE, Esq., Second Belooch Battalion, Hyderabad.

A PRIVATE of the Fourth Company was, on the morning of the 15th of June, seized with most violent pains of a crampy kind, in both upper and lower extremities. The gastrocnemius and biceps muscles were so sharply attacked as to become curled up into hard round balls. The neck and face were next implicated, the features becoming horribly distorted, the teeth firmly set, and the jaws fixed. Presently the whole of the anterior part of the body was rendered hard and stiff by the frequent muscular paroxysms; the stomach felt like a board; the suffering of the patient seemed to be excruciating.

Treatment.—I at once ordered the head to be shaved, and to be covered with a large piece of cloth; with such pieces of cloth I likewise covered the whole of the anterior surface of the body, and kept three attendants constantly employed in trickling cold water over both head and body. After a short time, I gave calomel, nine grains, and opium, two grains, and ordered the following draught every half-hour—viz., sulphuric ether, one drachm; hyoscyanic tincture, thirty minims; camphor mixture, one ounce. Under this treatment the violence of the spasms gradually abated, and after three hours a most profuse perspiration broke out all over the body. The cold water was now withdrawn, and after a little time I gave calomel, eleven grains, and jalap, one scruple, and followed up this with a full dose of castor-oil. These medicines produced a most copious evacuation, but of the most abominable kind. I now renewed the cold application, and kept it up till bed-time, when I ordered Dover's powder, ten grains.

June 16th.—Slept well all night; is perfectly free from all pain and spasm. No medicine; to get lime-juice and arrack. —Evening: Is doing well. Ordered mercury pill, four grains; and in the morning Gregory's powder, one scruple.

19th.—He went on very well, and I discharged him, but in a few days he was brought back, having been seized with a similar attack.

I pursued much the same treatment as before, only I used purgatives more freely, for I do put some faith in this class of medicines, but little or none in opium, as I have invariably found, in all cases of tetanus, that a considerable deal of irritation is referrible to the intestines. In such cases, too, I depend very much on the application of cold as I employ it: it is very different from giving a cold bath, which I think would not be safe. I was unable to discover the cause of the disease in this instance, so I put it down as a case of "idiopathic tetanus."

Hydrabad, Aug. 15, 1851.

ON A CASE OF STRANGULATED FEMORAL HERNIA.

By J. W. PERRIN, Esq., M.R.C.S. Eng., & L.A.C.

M. C—, aged thirty-six, married, came under my care August 20th, 1851; had been indisposed for more than a week, having suffered from colicky pains and flatulency; had an attack of peritonitis three months ago; has had a femoral hernia on the right side for about three years, irreducible, and for which she has worn a truss with a concave pad. This morning neglected to put the truss on, and soon after evacuating the bowels, was seized with vomiting of green bilious-looking matter; great pain of abdomen, much increased on pressure; tympanitic state of it. On examination the tumour was found about the size of a walnut, tense, and exceedingly painful on pressure; pulse 96; tongue moderately clean. Some blood having been taken from the arm, an attempt was made to reduce the tumour, but was not attended with success; and considering that it had been irreducible from its first occurrence, it was thought advisable not to persevere with such a proceeding. A grain of calomel and the like

quantity of opium were ordered to be given immediately, and an effervescing draught, with hydrocyanic acid, every three hours. Three hours afterwards the vomiting continued and seemed increasing in severity. Opium and calomel to be repeated, and an enema of castor-oil and oil of turpentine, with a pint of gruel, to be administered. This was retained for several hours, then came away without being mixed with feculent matter. In the evening the vomiting was more severe than before; the pain of abdomen had increased; leeches were ordered to be applied, afterwards a linseed-meal poultice, and to continue the effervescing mixture; the calomel and opium to be repeated every three hours; the long tube of the stomach-pump was passed a considerable way up the bowel, and about two pints of warm gruel injected; this was retained several hours, then came away quite clear.

August 21st.—The vomiting continued about the same as to its frequency, but the matter vomited is much greater in quantity; pain on pressure less, but paroxysms of colicky pains of a most severe character occur very frequently; abdomen exceedingly tympanitic; pulse, increasing in frequency, 104; tongue clean; an enema of warm water to the amount of two quarts was injected without effect. Ordered one drop of croton oil every two hours.

22nd.—Three doses of the croton oil were taken, all of which were immediately rejected; pulse 120; abdomen more tympanitic than before, but not very painful on pressure. There is now no pain in the hernia when pressed upon; the vomiting is now almost incessant, and the matter vomited is of a decidedly feculent character; patient complains of a sense of heat and burning in the throat, and a feeling as if the abdomen would burst from distention; frequent gaping, and great restlessness. As the symptoms now indicated that an actual strangulation had taken place, an operation was proposed, and acceded to by the patient and her friends.

The patient being placed on a firm table, an incision about two inches and a half long was made over the tumour from above Poupart's ligament downwards to the base of it. The coverings, which were much condensed, were carefully divided, and the sac laid open. A small quantity of dark-coloured serum then escaped, and a knuckle of intestine, of a chocolate colour, presented itself, tense from its distention with flatus. The stricture was exceedingly tight, and after some difficulty the director was passed up between the intestine and the neck of the sac, and the stricture divided. The intestine then collapsed, but could not be completely returned. As the stricture appeared to be freed, it was thought advisable not to interfere further with it; the wound was brought together by three sutures, and a pledget of wet lint applied. Two grains of opium were ordered to be given immediately; wine-and-water occasionally. After the operation the vomiting ceased, and the pulse sank down to 88.

23rd. The report is:—Passed a good night; but the pulse is somewhat quicker than it was last evening; the bowels have not acted. To have beef-tea occasionally. Still troubled with eructations and cardialgia; the wound looks well. To continue the cold-water dressing.

24th.—Complains of nausea and a feeling of fulness of the abdomen, which is very tympanitic; spasms of the abdominal muscles; umbilicus retracted; pulse about 90. Ordered, an effervescing draught, with hydrocyanic acid and tincture of opium, every four hours. A liniment, composed of one drachm of croton oil and two drachms of olive oil, to be rubbed in the abdomen; and an enema of salts and infusion of senna, in a pint of gruel, to be thrown up the rectum.

25th.—The injection was retained during the whole of the night, and came away this morning, mixed and followed by feculent matter; abdomen now soft and natural; pulse 100; tongue clean. To have sherry-and-water occasionally.

27th.—Pain in the abdomen again returning, with a feeling of nausea, but no sickness; the bowels have not acted since the 26th.

28th.—Vomiting has returned; matter vomited of a decidedly feculent character; complains of griping pain in the abdomen, which is much swollen again, but not painful on pressure; wound going on well; pulse 104.

29th.—About the same; still vomits as before every three or four hours, each vomiting being preceded by violent pain in the abdomen and a feeling of weight in the epigastrium; refuses to take any more medicine, as she says she must die. Sherry-and-water, with arrow-root and beef-tea, were ordered.

The patient went on in this way up to Sept. 1, the vomiting continuing, and there being no action of the bowels. On this day, about a quart of tepid gruel was thrown up the rectum, which was retained about ten minutes, and then discharged,

mixed with some shreds of fæces, very trifling, however, in quantity; some flatus was also passed. Mr. Cock saw the patient in consultation with me in the evening. Sherry-and-water and ice to be taken frequently, and a grain of opium and half a grain of calomel every three hours.

Sept. 2nd.—Pulse 100; bowels have not acted; nausea, but no sickness; abdomen very tense and drum-like. Somewhat under the influence of the opium; pills to be given less frequently.

3rd.—No sickness, but a feeling of excessive nausea; cardialgia; weight and oppression in the epigastrium; pulse 104.

4th.—Bowels acted three times this morning, and four times more in the course of the day. The sickness, pain, and tympanitis have subsided; pulse 104; to omit the pills; wound nearly cicatrized. Without going on with the daily reports, it may suffice to say that the patient went on well, suffering colicky pains occasionally after taking food, but is now quite recovered.

Remarks.—The case is certainly one of great interest. The time which elapsed between the operation and the proper action of the bowels is worthy of notice (about fifteen days), for it may, perhaps, be well doubted whether the faecal matter which was mixed with the injection administered on the 24th came from above the strictured part of the intestine. What, then, caused the persistence of these symptoms after the operation? Was it that intestine still remained strangulated at the neck of the sac? The termination of the case shows that this was not the cause; most likely it was dependent upon the injured intestine being left in a debilitated or weakened condition, so that for a time its peristaltic action ceased in that part; or from its being bound down by adhesions, and thus presenting an obstruction to the passage of its contents, which time eventually surmounted, the bowel being kept quiet. Most likely the former condition was the cause, for if the latter had existed, it is not probable that it would have been got over. Had strong purgatives been perseveringly administered, I have no doubt that either the vomiting would have increased, and death taken place by exhaustion, or the intestine would have given way, allowing effusion of its contents into the peritonæum, so causing inflammation and death; or an artificial anus might have been formed in the event of the effused matters finding their way to the external wound.

King's-row, Walworth-road, 1851.

SPONTANEOUS CURE OF OVARIAN TUMOURS BY DISCHARGE OF THEIR CONTENTS THROUGH THE FALLOPIAN TUBES.

By JAS. ROBERTSON, M.D., F.R.C.S. Eng.,

PHYSICIAN TO THE INFIRMARY, HITCHIN.

THE remarks on Drs. Cartwright and Warren Stone's catheterism of the Fallopian tubes in ovarian dropsy (*THE LANCET*, vol. ii. 1851, p. 228) called to mind a case which occurred to me a few years since, of which I took notes at the time, and afterwards was enabled to add the post-mortem appearances. I think it very interesting, as showing the same disease in both ovaries in course of cure spontaneously.

Mrs. —, a delicate, strumous, married young woman, consulted me in June, 1847, regarding her enlarged abdomen. She said that now her abdomen had enlarged gradually for some months, but more rapidly within the last two months; it was as large as, and of similar appearance to, that of a pregnant woman at her full time. She had menstruated regularly; did not think she had ever been pregnant; passed but a small quantity of milky-looking urine. A fluctuating tumour filled the pelvis, pressing on the rectum and vagina; the uterus was distinguishable, high up, but small. A catheter was passed: the bladder was empty. She told me she had a similar swelling about a year before this time, which ended by an immense discharge from the vagina. She attributed this first attack to over-exertion in walking; her health had been very delicate for some years. She suffered much from dysmenorrhœa. A few days after this, whilst in bed, suddenly a great discharge of most abominably stinking, white, slimy fluid, with a quantity of white and greenish flakes and pieces of bladder-like substance floating in it, enough to fill two full-sized chamber-pots, took place per vaginam. The abdomen resumed its natural size; the discharge in four months diminished to a mere weeping. She now had symptoms of phthisis, and died in September, 1848.

On making examination after death, we found old adhesions plentiful about the lower abdominal and pelvic regions, attaching the various viscera together. In the right ovary was a cyst as large as a medium-sized orange, with a very ragged interior, containing some fluid like that discharged; it was much corrugated and collapsed, and communicated with the Fallopian tube, on which were two other cysts of the same appearance as the other, but about one-fourth the size; there was also one cyst, unruptured, as big as a small orange, filled with glairy fluid, in the same ovary. In the left ovary was a cyst of precisely the same appearance as that first described, but empty, communicating with the left Fallopian tube. The Fallopian tubes were dilated; the uterus was sound, but harder than usual throughout.

The following is somewhat similar, but not so complete:—

Mrs. G—, a cachectic, strumous, married woman, aged thirty-six, not having been pregnant, and who menstruated regularly, observed, about sixteen years ago, (this was in December, 1848,) a fulness in the right iliac region, which had since gradually become greater, and which, on examination, presented the usual signs of an ovarian tumour, she being at this time as big as if about seven months gone with child. In February, 1849, she found herself one morning, on waking, in a pool of "blood and matter" up to her shoulders, which had escaped per vaginam. A considerable discharge continued for some time, but in six months had nearly ceased, her general health had improved, and the abdomen resumed its natural size. She is now (September, 1851) in pretty good health, and the contents of the pelvis appear healthy.

Hitchin, Herts, 1851.

ON A NEW AND SIMPLE METHOD FOR THE CURE OF FISTULA.

By H. B. EVANS, Esq., M.R.C.S. &c.

THE frequent occurrence of fistula, and the often unfortunate and unsatisfactory results of an operation intended for its cure, induce me to make known to the profession, through the medium of *THE LANCET*, a simple plan of treatment, which has proved eminently successful in two cases under my care.

In October, 1850, W. E—, box-maker, aged forty-two, applied to me with an abscess in the neighbourhood of the rectum, pointing externally, which was opened, and gave exit to a large quantity of pus. This gradually degenerated into a deep fistulous tract along the rectum, and communicating with it at its extremity. For two months the usual remedies were adopted without success, and I then expressed my opinion that an operation must be resorted to. In this I was fully borne out by the opinion of an eminent hospital surgeon whom I called in. This the patient obstinately refused to submit to, and such refusal led to my adopting the mode of treatment I am about to detail.

A blunt-pointed silver probe, five inches in length, (the sinus itself being four inches in depth,) was inserted into the wound, having previously been dipped in dilute nitric acid, (one part of acid to one part of water,) and suffered to remain there a minute. That this had a strong cauterizing effect, I knew from the pain it occasioned. Thus far the result was desirable; but in consequence of the destruction of the silver probes by the acid, and the impossibility of using them more than three or four times, I had some copper ones made, and used them in the same manner, only thus substituting a nitrate of copper for a nitrate of silver, and I think with a better effect. Under this treatment I was pleased to see the depth of the sinus daily decrease by the gradual filling of it up with healthy granulations from the bottom. This was continued nearly every day for two months, February 22nd, 1851, being the last occasion on which I thought it necessary to apply the nitrate of copper. The patient is at the present time perfectly sound.

In March, 1851, W. H—, aged thirty, applied to me with strumous disease of the testicle. Iodine and iron were given, which arrested the progress of the disease, and produced a corresponding improvement in his health. The outward form of the testicle was retained, but with an open sinus of an inch and a half in length in an oblique direction from the apex, and discharging a thin, white, glairy fluid, peculiar to fistulæ. The same treatment was pursued as in the former case, the sinus becoming entirely filled up, and the patient discharged at the commencement of the present month (September), without any external marks of previous disease, beyond a slight irregularity on the surface and a small cicatrix.

Thus by an easy method may the most strumous fistulæ be traced to their extremities, and a strong caustic power applied