Clinical Notes :

MEDICAL, SURGICAL, OBSTETRICAL, AND THERAPEUTICAL.

THE COCAINE HABIT.

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THE following case of long-continued addiction to the use of cocaine, which lately came under my notice, will probably be of interest to the medical profession.

The patient, a gentleman, consulted me for a feeling of inaptitude for work, mental indecision, occasional palpitation of the heart, and dyspeptic symptoms. I ascertained that three years ago he had been recommended to apply a 5 per cent. solution of the hydrochlorate of cocaine to the nasal mucous membrane to relieve an attack of nasal catarrh, and that he had found the result so pleasurable that he had continued the application on and off for a period of three years, quite irrespective of any catarrh or affection of the mucous membrane of the nose. At no time did he abstain from the use of the cocaine for a longer period than two weeks, and he frequently employed it daily over a period of four or six weeks. As a general rule, he used up four or five grains of cocaine daily in the form of a 5 per cent. solution, although occasionally as much as eight grains were used in a day. The cocaine was always applied with a long nasal brush, the spray never being employed, and the mucous membrane of the nose was the only part to which the application was made. He informed me that at first the use of the cocaine produced some sleeplessness, but that this passed away after employing it for two or three months, and that he drifted into the use of the drug on account of the feeling of freedom from worry and the local and general pleasurable sensations excited by it. The drug exerted no influence upon the sexual functions. During the latter half of the three years of its employment he had noticed a gradually increasing indisposition for work, together with a growing inaptitude for coming to a ready decision with regard to affairs connected with his business and daily life; also a disposition to shun society. He felt that his general health was not so good as formerly, and he had been subject for the last two years to chronic constipation, together with occasional attacks of palpitation of the heart and slight dyspepsia. I pointed out to him the probable connexion of his symptoms with the long-continued employment of cocaine, and strongly advised him to break himself of the habit, ordering him at the same time a simple tonic and to employ abdominal massage with a four-pound cannon-ball for five minutes every morning in order to relieve the constipation. Six weeks later he informed me that he had entirely broken himself of the use of cocaine, although for the first week he suffered from great depression, and had a strong desire to return to it. He had entirely recovered from all his bad symptoms, his mental decision and powers of application to work being thoroughly restored.

Westbourne-terrace, W.

CASE OF HYDATID MOLE.

By JAMES OLIVER, M.D., F.R.S. EDIN.

WELL-RECORDED cases of hydatid mole are sufficiently rare to warrant the publication of one which very recently came under my care at the Hospital for Women.

Annie T—, aged twenty-five, and married seven years, has had five full-time children and no miscarriage. The last child was born two years and four months ago. This child was suckled for sixteen months, and the patient was unwell each month during the first five months of nursing. After the child was five months old she was never again unwell until one month after weaning. The last child was the first which had been suckled by the mother. Menstruation was established at the age of fourteen, and it has usually lasted seven days. On April 22nd she began to lose, and continued to do so until July 10th, losing more

or less every day—i.e., for eleven weeks. Prior to April 22nd she had not menstruated for three months, although until then, and after she had weaned the baby, she had been quite regular, and lost as usual. Besides complaining of constant hæmorrhagic discharge, she complained also of pain all over the lower part of the stomach. The pain came on generally at night, after going to bed, though it had occasionally been noted during the day. There was a constant feeling of "soreness of the stomach," such as one experiences after colicky pain. The patient began to lose blood before she complained of pain; the latter was remarked, however, within twenty-four hours after the establishment of hæmorrhage. For three weeks both lower extremities had been swollen, and pitted readily on pressure. Six weeks before she began to lose constantly there was noted a slight discharge of blood after coitus. There was no bladder or rectal trouble. Eleven weeks previously to my seeing the patient, she began to feel sick, and latterly she had actually vomited at least once every day. No movements had been felt. On examination, the abdomen was occupied by a uniformly globular swelling, located centrally, and reaching to one inch above the umbilicus. It was somewhat soft, but seemed to harden under the hand in consequence of contraction. No fœtal heart or uterine souffle could be detected. The swelling was tender all over to the touch. The breasts were not enlarged, but were, in fact, flabby, and no colostrum could be obtained from either. On vaginal examination, the cervix was soft and patent, and nothing was felt in the cervix itself. The abdominal tumour moved the cervix readily, and was uterine; it was equal in size to a six months' pregnancy. My diagnosis was pregnancy, the child being dead. On July 12th, two days after the patient saw me, I received a letter from Dr. Townsend of Lewisham High-road (whose patient Annie T— was), saying: "A hydatid mole weighing 2lb. came away this morning; there was a good deal of hæmorrhage, and I had to clean out the uterus, swabbing the cavity with perchloride of iron."

It is stated by the majority of authors that in cases of cystic disease of the ovum the tumour rapidly increases in size, and that the size does not correspond with the supposed period of pregnancy. In the above case there was no rapid increase, and the size of the tumour corresponded well with that of the supposed period of pregnancy—viz., six months. The discharge was always hæmorrhagic, and at no time had it been noted as watery.

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WOUND OF THE RADIAL ARTERY.

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THE following case of wounded radial artery came under my notice lately, and is, I think, worthy of note from the length of time that elapsed before the patient was treated, and from the quantity of blood lost.

W. F—, a miner, aged twenty-eight, while working in a shaft of an Anglo-Saxon gold-mine, received a cut across the left wrist, occasioned by a fall of sharp quartz. The wound was about two inches long, extending from the base of the thumb upwards and inwards. There was considerable hæmorrhage for some time, but it was controlled, and after three days the man was able to be about, with his arm in a sling. On the fifth day hæmorrhage set in again, and the patient lost a large quantity of blood; but a poultice of salt eventually stopped it. From the great loss of blood he naturally became very weak and anxious, especially as on the twelfth day a loss of blood again took place. I was therefore sent for, and arrived on the fifteenth day after the accident. The distance I was obliged to travel being forty miles over very rough country, I did not reach him until late at night, and as he was comfortable and no hæmorrhage had taken place for fifteen hours, I thought it better not to do anything until daylight. Next morning I visited the camp and learned the man had slept well and felt better. On removing the dressing, I found the wound looking healthy and commencing to granulate. As there had been no sign of blood for twenty-six hours, I merely applied lint saturated with carbolic oil, and told his friends to use it three or four times a day. I also improvised a tourniquet with a piece of cork,