morphia in solution being tried and retained by the stomach, it was directed to be given, one grain every two hours, or in such quantities as to produce sleep. By an oversight the order for the external application was not countermanded, consequently the patient got by six o'clock P. M. six grains of the sulphate of morphia internally, and ten grains externally. At seven, she was found somewhat nareotized, pulse 120, respiration seven in a minute and gasping; pupil contracted to the smallest point; yet patient did not sleep; said she could not get her breath; heard all that was said in the ward; would reply to remarks not addressed to her. Ordered morphia suspended; sinapisms and Granville's lotion to back and chest; cold water to the head. At eight, satisfactory. Respiration normal, pulse 140. Myself or Dr. Jenkins with patient all night.

17th, 2 o'clock A. M. Pulse has been 150 during the night; is now 140; patient sleeps lightly. At 3 o'clock, gave morphia, three grs. At 4 o'clock pulse 130; respiration seven; morphia suspended.

8 A. M. Pulse 125; respiration better; diaphoresis still continues most profuse; no pain; bowels moved yesterday twice; micturition free; indifference towards child; face flushed and pinched somewhat; morphia resumed, gr. j every two hours. During this day pulse was 120. Patient slept; bowels and bladder evacuated freely.

18th, 6 o'clock A. M. Attendant asleep, room cold. Pulse 135. Patient restless; inquired whether that was her child crying. The morphia was continued at the same rate.

10 o'clock P. M. Patient comfortable all day; pulse 120. Has manifested a good deal of anxiety about her child; asked me to send her some toast and tea from my table. Thus far her diet has been thin gruel. The morphia was continued.

19th. Patient says she is "first rate." The bowels were moved three times yesterday, and as often to-day.

20th. Patient continues to do well; bowels opened six times yesterday; stools pea-green and of the consistency of soup. The lochia returned in the evening.

23d. Pulse 100. Patient has a bed-sore, but is doing well on a generous diet; cannot sleep without morphia. Milk begins to be secreted in small quantities.

27th. Patient is well, though lacking strength, and some tissues destroyed by the bed-sore. The morphia is still required, though in diminishing doses.

Jan. 1851. The secretion of milk has not been re-established fully, and the child has therefore been given to a wet-nurse. Otherwise, Mary B. seems to have quite recovered from her illness.

ART. XII.—*Cases of Delirium Tremens successfully treated by the Administration of Chloroform.* By STEPHEN H. PRATT, M. D., of Baltimore.

CASE I.—May 7th, 1850, I was called to see E. B., labouring under delirium tremens.

E. B. had, that day, been taken from the ——— Infirmary, where he

had been for the last seven days under judicious treatment for the above-named disease. During this time (seven days) he had not slept any, as I had been, that morning, informed by the resident physician; and his case was deemed almost hopeless. His friends became alarmed, and (very injudiciously, I thought) removed him, and placed him under my care.

It was 1 o'clock, P. M., when I saw him. He was very feeble, and much exhausted by disease and protracted wakefulness. His pulse was feeble and frequent. There were subsultus, muttering, great incoherence, with cold and clammy extremities.

Having been advised that he had been on a mixed opiate and stimulant treatment, at least a part of the time, and having had some success previously, in the use of chloroform, I determined to use it now. Accordingly, one drachm of chloroform, diluted with water, was exhibited. At 5 o'clock (P. M.), another drachm was administered; and at 9, still another, diluted as before. At 10, he fell asleep and slept till morning. At 8 (in the morning), he waked and drank some gruel, after which he soon fell asleep and slept till noon.

He now waked with a good appetite, which he too freely indulged by partaking of soup. However, he was quite comfortable during the afternoon, and slept well through the night. Next morning, he vomited two or three times freely. The enesis was not violent, and was easily controlled. From this time, paying strict attention to his diet, he rapidly convalesced.

During this sickness no medicine was exhibited but chloroform (not even aperients), and this but three times. On the fifth day, the patient left the house to attend to his affairs, and was soon in health.

CASE II.—Was called to see J. H., June 4th, 1851, labouring under delirium tremens. Put him upon a mixed opiate and stimulant treatment through the day, and exhibited opium in full doses through the night. This was continued two days and nights, without benefit. Indeed, the patient grew worse. The third morning I put him upon: R. Spts. sulph. ætheris comp., tinct. valerianæ, ana ℥iiss; to take ℥ii every two or three hours, intermediately giving tinct. opii. At 8 o'clock P. M., gave a large opiate. At 10 P. M., gave tinct. opii ℥j. At 12, repeated the dose; and at 2, again repeated it. All this time the patient grew worse, and became "furiously delirious," frightening all the household.

Three men were employed to prevent him from jumping out of the windows (several attempts at which he had made), or otherwise injuring himself. At times he was a match for them all. At length he grew weak, becoming more and more prostrated by his great exertions. The family became alarmed, and wished further advice. A consulting physician was called in. A hot stimulating pediluvia and an opio tartar emetic treatment were agreed upon.

I suggested chloroform internally, which was not wholly objected to, though not preferred by the consulting physician. Accordingly the former was tried, but unfortunately without success, the patient rapidly growing worse.

He was now beyond control, a raving maniac, a terror to all present. His pulse was very feeble and frequent; so frequent it could not be counted with the existing tremor. His tongue was dry; there were also muttering, subsultus, and perfect incoherence, with cold and clammy extremities.

Under these circumstances, I determined to exhibit chloroform as a dernier resort.

A teaspoonful nearly, diluted with water, was administered. After one hour, the following was given: R. Spts. sulph. ætheris comp., tinct. valeriana, aa ℥ii; chloroform ℥i (at a draught).

(The compound spirit of sulphuric ether and tinct. valerian were added in order to obviate, if possible, the danger of fatal prostration.) Fifteen minutes

after its exhibition, the patient fell asleep, and slept soundly three and a half hours. Meantime, perspiration ceased; his extremities became warm; his pulse grew calmer, fuller, and firmer. He then awoke much refreshed and quite rational, and had a free, natural dejection.

Three teaspoonfuls of the mixture, R. Hoff's anodyn. and tinct. valeriana, with half a teaspoonful of chloroform, were then exhibited. After this, he washed his hands and face, and bathed himself generally. In one hour, I exhibited ℥jiv of the mixture, with ℥si of chloroform, and persuaded him to lie down. In a few minutes, he was asleep, and slept comparatively soundly four hours, when he arose, went down stairs, and evacuated his bowels. In fifteen minutes he was again asleep, and slept three hours, when he waked and drank a tumbler of milk, took a dose of spts. sulph. ætheris comp. and tinct. valeriana; fifteen minutes afterwards he was asleep again, and continued sleeping through the night, rising, meantime, but once.

In the morning he rose, drank some milk and beef tea, and after evacuating his bowels again went to sleep. His pulse was now good; extremities warm, glowing; subsultus greatly diminished; delirium almost entirely wanting. He slept till about noon, and then waked still more tranquil. During the afternoon, he slept and waked alternately, and rested well the following night. His sleep was not comatose. When awake, he was wide awake, cheerful and lively. A day or two passed thus as he rapidly convalesced. On the 9th, he was walking about the city a comparatively well man. He has continued well since.

Such are the facts. From a furious delirium, with subsultus, perfect incoherence, cold, clammy extremities, a feeble, fluttering, frequent pulse, costiveness, &c., by the tranquillizing and peculiar (shall I say specific?) influence of chloroform he was rescued, in a little more than an hour, and thrown into a condition the most favourable possible; from which, in a few days, he was restored to his usual health. No emesis, or irritation of the bowels, occurred. No cathartics were exhibited, yet gentle motions followed the administration of chloroform.

The methodus medendi of this wonderful agent I will not here attempt to explain. Facts are of more importance than inferences, and if, by this contribution, I add one to the facts already recorded, I shall be satisfied.

BALTIMORE, Aug. 1851.

ART. XIII.—*Paronychia an Epidemic.* By JAMES E. MORGAN, M.D.,
Demonstrator of Anatomy in National Medical College, Washington, D. C.

PARONYCHIA has, without doubt, existed in Washington this summer as an epidemic; and, as its prevalence in that form has not, to my knowledge, been noticed by any writer, I have thought that an account of it might not be uninteresting to the profession. Scarcely a day passes but that I am called upon to prescribe for several cases of this apparently trifling, but always painful, and sometimes fatal disease.

It usually commences with a pain in the arm and forearm, which continues for two or three days with greater or less intensity, according to the severity of the case. These symptoms then suddenly cease, and the patient is seized with a soreness like the pricking of a needle, or brier, in one or all the