NOTE ON THE
USE OF THE CALOMEL VAPOUR BATH.

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IN the *American Practitioner* for September, 1877, Dr. Yandell has given perhaps the fairest and most impartial account of the different modes of using mercurial fumigation that has yet been published. It is twenty-three years, Dr. Yandell remarks, since he commenced the use of the mercurial vapour bath, and he has used it ever since. Other forms of mercurial treatment are also employed, but, where circumstances permit of it, he prefers that to any other.

Dr. Yandell commenced his experiments with what he conceived to be Mr. Langston Parker's apparatus, with the grey oxide of mercury; but found that the degree of heat necessary to vaporise the powder a very serious objection. The bisulphuret was next tried, without benefit. The irritating fumes of the sulphur and the heat acted injuriously. It was then found that the so-called cinnabar that he used contained ninety per cent. of lead to ten per cent. of mercury. Unadulterated cinnabar was now used, mixed with the grey oxide, and the results obtained were more satisfactory than with either alone. Still the extreme heat necessary to vaporise the latter, and the suffocating fumes of the former, told heavily against their use. At length calomel was tried, and "the mere mechanical troubles with the fumigations were now virtually at an end."

Dr. Yandell found, however, that his patients did not improve so rapidly as mine did in London, and asks, with much point, what the explanation can be? We both used the same apparatus, and the same quantity of calomel, and why should the same treatment cure quickly in London, and not cure quickly in Louisville? The solution of this question is not difficult, and for the benefit of others I wish to answer it publicly rather than in a private communication.

The great majority of those at first treated were hospital cases, and, as Dr. Yandell says, the *LONDON LANCET* of that day abounded in reports of such cases. He gives me the credit, which I also claim, of having reported the cases faithfully. The patients, often several in succession, were placed in a box in which the ten or fifteen grains of calomel was volatilised. The room in which the box was contained was small, and, looking back upon the rapid and almost uniform results obtained, I have no doubt whatever that the patients got the benefit of some of the calomel that was left in the box, and perhaps in the room, in addition to the ten or fifteen grains that was devoted to their individual use. In private practice I generally directed patients to use the same cloak night after night, and to sleep in it,¹ and thus the calomel vaporised one night was again to some extent utilised the next.

Dr. Yandell found that in order to produce the desired effect he had often to use one scruple, half a drachm, or a drachm of calomel for each bath. Where patients like to have a clean cloak for their baths, and wash the calomel off by means of baths, I have, as he suggests, found the same thing, so that substantially his experience and my own coincide.² It may be well here to mention that I now use calomel that has been previously resublimed two or three times. Ordinary calomel is less affected by heat or moisture than any other preparation of mercury, but still it does contain a certain amount of hydrochloric acid, the presence of which may be indicated by a piece of moist litmus-paper held in the fumes as they arise. This free hydrochloric acid is driven off in a great measure by sublimation, and the pure calomel thus prepared is less irritating than the ordinary calomel of commerce. It should also be observed that the water I originally used was principally for the purpose of preventing irritation from any fumes that might be generated during the action of the baths, and I find that an ounce on each occasion is quite sufficient. If more water be employed, more heat is necessarily required in order to boil it. The vapour of the water is in part deposited on the patient's skin; this must in some way be removed before he is com-

fortable, and some of the calomel is necessarily removed with it. Dr. Yandell uses a pint of water in the apparatus which he has depicted, and the patient has thus a combined vapour and calomel bath. This no doubt may be very useful where such a combination is intended, but the effect is often very different from that produced by the calomel bath alone: a much greater amount of perspiration is induced, and this the patients, when the bath is repeated night after night, cannot bear. The perspiration also tends to remove the calomel from the skin.

Dr. L. P. Yandell is of opinion that brisk friction after the sweat, made with the coarsest towel, and until the skin is all of a glow, actually promotes the action of mercury, and conduces to its more rapid absorption. This no doubt may be the case, but it involves a different principle. The calomel is rubbed into the skin in a similar way as the mercurial ointment was in olden times.

Savile-row.

NOISES IN THE HEAD; THEIR ETIOLOGY,
DIAGNOSIS, AND TREATMENT.

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PERHAPS no symptom is so generally associated with vague ideas as to its pathological import, or even as regards its location, as is tinnitus. In proof of this assertion, it will suffice to notice the following case from a work on aural surgery bearing date 1876. The patient had suffered from distressing noises in his left ear for two years, and had undergone treatment for his heart, his lungs, his stomach, his kidneys, and his liver, "according as each of these organs had been diagnosed as the primary cause of his complaint"; and at the time the case was reported he was suffering the "additional inconvenience of a large seton in the nape of his neck." An inspection of the ear revealed a large pulsating polypus, the beating of which was controlled by pressure on the left carotid.

The confusion surrounding this particular symptom is, indeed, not to be wondered at, seeing that all writers on the ear, from Wylde to Roosa, agree that it is impossible as yet to differentiate the causes on which the various forms of tinnitus depend. The subject is one, therefore, demanding investigation; the more so as it will be found to involve problems less easy of solution than that comprised in the instance just referred to. Doubtless much of the perplexity in question arises from the habit of referring the noises, when their origin is not very apparent, to certain subjective conditions of the nervous system, more especially of the auditory nerve.

It will clear the ground I propose to traverse to dispose of these subjective phenomena at starting. While I do not affirm that such a condition never obtains, we take our stand on the distinctly objective causation of every phase of tinnitus which may come before us, contending that for a sound to be heard it must have a prior existence in some abnormal conditions capable of giving rise to it. The determination of the nature of, and the methods of recognising, such objective states, together with the treatment suitable for each, are the subjects I propose to consider in this paper.

As regards the noises themselves, it will be conceded that among the minor ills of life, common alike to all classes of society, they constitute one of very frequent occurrence; while not rarely they become a veritable thorn in the flesh, pursuing the victim with relentless torture by night as well as during the day. The records of our asylums show that insanity occasionally results from this cause. Some patients tell us their noise resembles the boiling of a kettle; farm labourers who have to do with modern agricultural implements compare theirs to a "chine going round"; in some it is like the roar of the distant sea; or this, again, is varied with cracks and explosions; while many bear witness to hearing always a sort of rhythmical thud, as though their head were the anvil of some unharmonious blacksmith. As if to satirise the infirmity, a large proportion of its subjects are more or less deaf to the sounds of the outside world. Under such a complication of evils, it will cease to be matter

¹ The cloak usually employed is called moleskin, and makes a very comfortable night-dress.

² Half a drachm of calomel is the quantity which practically I now recommend to be used for each bath.