dent fevers. It is believed by many, that the kausos of Hippocrates, which has been so elegantly commented on by the learned Cappadocian, was no other than the endemic fever that is of such frequent and fatal occurrence in and near the tropics. It often begins with intense headach; and delirium, in many instances, supervenes; but in a greater number of cases, the stomach, from the beginning, is excessively irritable, and the head suffers proportionately less; but when this affection of the head does take place, even in the highest degree, it is but indicative of great irritation of the biliary apparatus, accompanied by phlegmonous inflammation of the stomach, and not unfrequently of part of the intestines. This opinion has not been hastily formed, but is founded on twelve years' extensive practice in a country that was every year visited, more or less severely, by the puretoi kausoi under various modifications, but never taking on the character of idiopathic brain fever.

In many instances, where a considerable degree of delirium has been present in the early part of the disease, the acute symptoms go off, the skin assumes a fish-like coldness, reason is again seated on her throne, and the patient flatters himself with hopes of a speedy recovery, while to all around him, he is evidently sinking into the arms of death. In this stage of the disease, patients speak of persons and things, with which mere accident (particularly if assisted by a little of the marvellous) may furnish some curious coincidences; but I cannot say that any thing has come under my own immediate observation, which could, in any way, be connected with a "spirit of prophecy." It is true, nevertheless, that I have heard of an old woman of Massachusetts, in North America, having foretold in one of those "lightnings up before death," that Providence would, on a certain day, step out of its way, and so far reverse the laws of Nature, as to render another old woman perceptible of spontaneous combustion. It will be proper to state, that although this prophetess had escaped all suspicion of witchcraft during her life-time, she was heard, before making the above communication, to pronounce the word *abraxa*, and that after her death, the letters ABRAC were found marked in gunpowder over the region of the heart. Moreover, on tracing her genealogy, she was found to have descended in a right line from one of the magicians of Pharaoh, who changed the rods into serpents, and the waters of the Nile into blood; and it was discovered also, that one of her ancestors had married the witch of Endor, who called up the ghost of Samuel at the request of Saul.

GEORGIENSIS.

Cheltenham, March 21st, 1830.

PTYALISM FROM MINUTE DOSES OF CALOMEL.

By JAMES BIRD, Esq., M.R.C.S.

IN the month of April, 1827, I was in attendance on an unmarried female, about 26 years of age, who was suffering from spasmodic retention of urine. She had been many years an invalid, and had suffered severely from a spinal affection, the greater part of two of the lumbar vertebræ being completely destroyed by caries. She had been under the care of an eminent surgeon in a neighbouring city, whilst suffering under the acute form of her disease, and under his treatment had received as much relief as enabled her to follow her occupation as a needle-woman, moving about without much pain or difficulty, although her movements clearly indicated the loss of support behind. When I first saw her she was suffering, as I have named, from spasmodic retention of urine and an almost complete state of atomy of the whole contents of the pelvis, bladder, uterus, and rectum, being alike affected; in short, when either of the above-named viscera required to be relieved, she was for some time a perfect mass of spasm. She was under my care a considerable time, and every mode of relief I could devise, had a very fair, though, I am sorry to add, a far from satisfactory trial. The greatest relief was obtained by mechanical means; the regular use of the catheter, with opiate and purgative injections into the rectum, as the symptoms required. By a diligent use of the above, she was restored to the state she was in previous to her coming under my care; but I fear her diseased spine precludes the hope of her being relieved for any permanency. In the treatment of this case, I prescribed amongst others the following: a scruple each of mercurial pill, squill pill, and the compound gamboge pill, mixed well together, and divided into twelve pills, and directed one to be taken every six hours. Five pills only had been taken, when all the symptoms of mercurial salivation presented themselves, and for fourteen days, her mouth, gums, and the glands about the throat, were affected in the most severe and distressing manner. She had taken no mercury for some time previously, so I conclude all these symptoms were the result of the composition I have named.

The second instance occurred in a married lady, about a week subsequent to her confinement, and who was suffering a little from a bilious diarrhœa. I gave her three grains of calomel, and ten grains of rhubarb powder, followed up by a little cordial spirit in cinnamon water. The diarrhœa certainly was checked, but mercurial salivation supervened, that lasted for four or five days. In each of these cases I have termed it mer-

curial salivation, the factor of the breath clearly indicating the effects of the mineral on the system.

I could enumerate other instances, but perhaps they might be a little more equivocal than the cases related above. I have been induced to make this communication for the purpose of adding my testimony to the very clear case of Mr. Clayton, that such effects are produced by a very small portion of mercury; and I believe they are more frequent than is generally credited. I think also, that every case that is uncommon, or that presents any new feature in our practice, deserves to be communicated, if only to point out a few amongst the many shoals and quicksands upon which professional reputation may be wrecked.

This much I beg to observe in conclusion, that in no instance in which this almost *spontaneous* salivation has occurred, have I observed it operate unfavourably on the constitution; indeed, from what I have seen, I am inclined to attribute it as much to an effort of nature for throwing off more serious disease, as vomiting, sweating, discharge by urine or diarrhœa.

Cardiff, South Wales,
March 20th, 1830.

DERBYSHIRE GENERAL INFIRMARY.

CASE OF AN OLD WOMAN WHO HAD "A KNOB AT THE SIDE OF HER BELLY."

ELIZABETH WOODWARD, ætat. 68, was sent into this Infirmary on Sunday, Feb. 28, 1830, at about half past ten A.M. She came under the treatment of Mr. Godwin as surgeon for the week.

The case is entered in the book as one of "*strangulated femoral hernia*" on the right side. We believe the symptoms were not very urgent. The patient's bowels were much constipated, but alvine evacuations could not be considered suppressed; we hear she had a stool on the Friday night previous to her admission, viz. the day but one before; we believe the woman was not aware of having had a rupture; but when asked if she had "a lump at the top of her thigh," she said she had, but how long this "lump" had existed we know not. She is described as having had pain in the abdomen, and sickness; no "vomiting of fecal matter." The day before she was sent to the Infirmary, opening medicine and a glyster were administered, without the bowels being moved.

This case, called "*strangulated hernia*," arrived at the Infirmary (as we have said)

at half-past ten; between one and two o'clock a glyster of the infusion of tobacco, and a cold lotion to the tumour, were prescribed by the surgeon; these, we believe, were the *only remedies* used; we, of course, presume the taxis was tried.*

A consultation had been called (by notes sent to the surgeons only) for four o'clock, with a view to performing the operation, if decided upon. Mr. Godwin came much after the time he had appointed, and the operation for "*strangulated hernia*" was commenced at half-past five P.M. by candle-light, *seven hours* after the admission of the patient, which time was not occupied by trying all the *usual* measures for obtaining the return of a *hernia*. Mr. Wright, one of the staff, attended, with a *few others*, at the operation.

Mr. Godwin, after professing to have got down to *the sac*, and after various attempts to cut into this sac, said the *intestine* is so "*intimately adherent to the sac*," that it is impossible to open the sac! He proceeded, therefore, to divide various strictures in different directions, of course exterior to *the sac*. Something was said about a *double hernia*, and a *band* between the two, which required dividing with the knife. Attempts were now made to force the sac, and its supposed adherent contents, into the cavity of the abdomen, and the patient suffered much pain during these trials. *The sac* would not enter the abdomen, although various strictures had been divided. Some persons said *the hernia* was reduced by *the taxis* during the operator's efforts to return the sac. What became of "the intimate adhesions," if this were true? Some said the tumour, or sac, became less during the operator's efforts; others saw no alteration in bulk. Mr. Godwin having done the operation in twenty-five minutes, sewed up the wound.

The bowels became open in three hours after the operation, and again in the night. (Mr. Dix has entered in Mr. Godwin's Case-book—"Stool fourteen hours after the operation." We can only account for this, by saying *Cerberus Dix* is * * *) Abdomen painful and tender. The application of leeches was suggested, *inflammation* being suspected; but Mr. Godwin objected to the practice, although the belly was very hot, very hard, and tender. On Wednesday afternoon, *three days* after the operation, the patient expired; and "Mr. Godwin's experience led him to believe, that the intestine had sphacelated."

* We are anxious to know how long the glyster was retained, and whether it had any effect on the bowels, or on the constitution in producing collapse?—REP.