of the encephalon. The result of such effusion manifests itself variously, according to the seat or to the extent of the lesion that has occurred. It may have occurred in the base of the brain, or in the spinal column, as well as in the meninges or substance of the brain itself. If the effusion in the brain be slight, absorption may take place, attended with entire recovery; or the effusion may increase, and be followed by extension and aggravation of the paralysis, and ultimately by death. But there *can* be *no* doubt that both apoplexy and paralysis are occurring almost daily from intellectual disturbance, and consequent on a deficiency of the due equilibrium of the nervous and vascular systems. Amongst the multitudinous minor instances adducible, another striking instance of the effect of the mind is displayed in the change of the color of the hair, which becomes rapidly grey, or falls off, under the influence of anxiety and grief. The late chaplain of Newgate told me that he has been astonished at the rapidity with which dark-brown or black hair, in young subjects who have fretted after their commitment, has been bleached. A lady of my acquaintance, who experienced great unkindness from her husband soon after marriage, lost every hair, not only from the scalp, but the eye-brows and eye-lashes came off; and her skull, in a few weeks, was as smooth and polished as a billiard-ball.

Other instances of the extraordinary operations of the mind present themselves in the metamorphoses of the fœtus in utero, as is well known and are highly authenticated; and, moreover, powerfully illustrative of the subject of my lecture—in the dispersion of warts by what is termed charming them—the suspension of an ague-fit by impressing the patient's mind with the conviction that it will not recur (be the instrument what it may)—the removal of disease by pretending to a miraculous agency—of the toothache, by invoking the presence of the dentist, &c. &c.

[To be continued.]

CASE OF PARACENTESIS THORACIS, FOR ABSCESS OF THE LUNGS.

BY S. HOWARD DICKSON, M.D., MECKLENBURGH, TENN.

It not unfrequently happens, in the different departments of science, that the researches of philosophers and students shall continue for some time to throw light upon step after step of the solution of any intricate and undecided question, and then suddenly, just as we begin to look for the conclusion, so important to be determined, all progress in that direction ceases: and it is not until we have almost forgotten that we were expecting such a result, that perhaps, by accident, one other move is made and the end attained.

Let us hope that it may not prove so with the rapidly increasing light now being shed upon the once obscure subject of heterologous deposits. The improvements in that part of physiology which relates to cell-formation, more particularly the established facts that tubercle is broken down or spurious cell, and that it is not so much the mere oil and albumen of the cell, as the vital principle, which is wanting or perverted; and the announcement, by the analyzers of the sun's ray, that any organisms,

either animal or vegetable, deprived of the actinic or chemical influence of that ray, cannot perfect properly the function of nutrition; these and others on the same or allied subjects, seem to point to something definite just on the eve of demonstration or discovery, which shall not only enable us to understand more fully the nature and cause of tubercular degeneration, but also guide us unerringly to some efficient and radical treatment for this class of affections.

But in peering thus curiously into the future, I am losing sight of my original intention, which was to give you a short account of a case which occurred a few years ago, in the practice of an experienced and scientific physician of this place, who is also an intelligent and original thinker. The case and its treatment excited a good deal of attention at the time, and is still remembered by the people as well as by the practitioners of this and the neighboring counties. But to be brief:—

On the 24th of January, 1848, Dr. R. was called to see Mr. P., who lived several miles distant. P. is one of a family, all of whom are of consumptive tendency, himself, perhaps, as strongly predisposed as, if not more so than, any other member of it. Dr. R. remembers the weather as being cold, damp and disagreeable in the highest degree. He found his patient suffering from violent pleuritic pain, with great dyspnoea and high excitement of the pulse. A blister, in connection with certain other remedies, failing to relieve him, after a few days, extensive pustulation by means of tartar emetic ointment was resorted to. A cough, whose violence nothing could allay, and the excessive discharge of tuberculo-purulent matter by expectoration, soon reduced him to the lowest degree of emaciation. With his bones almost protruding from the worn and bed-galled skin, which formed their only covering, his cadaverous countenance was the image of that death which seemed fast approaching.

About this time, the presence of a large vomica, forming quite superficially in the lung, if I may use such an expression, became evident, and led the physician to nurse one of the largest of the pustules immediately over it. When the abscess thus formed was about the size of a walnut, he plunged a lancet into it, and through the orifice thus made, issued such a quantity of purulent matter, that Dr. R. thought it prudent to turn him upon his back, without allowing it all to escape, until he had recovered himself a little.

The establishing of this external opening, was followed by an immediate cessation of the cough, and great palliation of the other distressing symptoms.

There was a slight return of cough, occasionally, during the convalescence, which began and went on steadily from that time. Another vomica seemed to form, and after some uneasy sensations, with a burning and stinging pain, it burst, communicating with the former one, as was shown by the increased discharge and the relief consequent upon it. The discharge gradually lessened, however, and the orifice finally healed at the end of eleven months.

It seems to me especially interesting to notice that, the necessity for coughing being removed, and with it the irritation produced by the cough,

his health and strength began at once to return, in spite of the discharge from his lung; so that he was riding about on horseback for months, and even went several miles to Knoxville, a distance of twelve or fourteen miles, with the orifice still open.

I will make no apology for bringing this case to the notice of the profession, as Dr. R.'s incessant occupation precludes the possibility of his giving a more detailed and complete history of it. The facts I learned not only from the fortunate medical adviser, but from the patient himself, now a hearty, healthy man, who assures me that "no one need die of consumption, who will come to Dr. R. to open his side and let the matter out."

It will be observed, that while the authorities, in recommending paracentesis thoracis for empyema, &c., distinctly except all cases complicated with tubercular disease, the present is an instance of its being successfully resorted to in one of these very excepted cases. The rule is, however, as far as I remember, supported by no cases reported in the books, and seems to have resulted from the theory, that no treatment could subdue the irritative inflammation and ulceration of tubercles.—*Charleston Med. Journal.*

REMARKABLE MIGRATIONS OF A PIN AND NEEDLE THROUGH THE BODY OF A YOUNG LADY.

BY NAPOLEON B. ANDERSON, M.D., LOUISVILLE, KY.

ON the 20th of April, 1849, Miss Catharine M——, æt. 19 years, in a fit of laughter accidentally swallowed a large brass pin and a medium sized needle. No pain attended the passage of these bodies into the stomach, nor was any felt until after the expiration of about the third week, at which time a warm, pricking sensation was first felt in the cardiac orifice of the stomach, which position it maintained for the space of three months, when it gradually changed, and seated itself in the lower lobe of the left lung. In this situation it remained for some nine months, without any disturbance to the organ of respiration in which it was felt, with the exception of occasional cough and slight hemoptysis. During this period, the pain gradually moved to the glenoid cavity of the scapula, and was experienced at the insertion of the deltoid muscle, in which situation considerable pain was the result of elevation or rotation of the arm. From this point it moved to the arm pit, when the arm had to be carried horizontally, and no elevation, rotation, adduction or abduction could be performed without excruciating pain; the inner part of the arm turning very black, from the infiltration, I suppose, of blood into the surrounding parts. Pressure upon the parts produced no material change in coloration, nor was there any unusual amount of sensation or numbness in any part of the discolored portion, with the exception of the region in which these foreign bodies were situated. The arm remained in this condition, with no material changes, until December, 1850, when the pain and uneasiness moving from the arm-pit, towards the articulation of the ulna and radius with the humerus, settled in the belly of the bi-