some preparations in proof of the sanability of phthisis pulmonalis. In one, a large deep cicatrix was seen in the upper lobe of the lung. The patient had died in the infirmary of delirium tremens. From the account given by his friends, it appeared that, about twenty years before his death, he had been affected with the ordinary symptoms of consumption, but that he was restored to health; apparently in consequence of improvement in his circumstances and habits of life. In another preparation, two stellate puckerings on the surface of the lung were found to correspond to two caverns with indurated walls which seemed to be undergoing the process of cure. In other two preparations, numerous small gritty masses were disseminated; these were specimens of abortive miliary tubercle. These appearances were exceedingly frequent; Dr. Bennett had met with them so often in the post-mortem examinations conducted at the Royal Infirmary, that he had stated, in a communication read several years ago before this society, that evidences of tubercular disease were found in one-third or one-fourth of all who die after the age of forty.—*Month. Journ. of Med. Science*, July, 1849.

—

15. *On the Use and Administration of Cod-Liver Oil in Pulmonary Consumption.* By C. J. B. Williams, M. D.—In the important paper which we proceed to analyze, the author arranges the results of his inquiries under three heads: 1. General results of the use of cod-liver oil in phthisis. 2. Its mode of operation. 3. Its preparation and administration.

1. The author states that he has prescribed the oil in above 400 cases of tubercular disease of the lungs in its different stages, of which he has notes of 234. Out of this number the oil disagreed and was discontinued in only nine. In nineteen, it appeared to do no good; while, in the large proportion of 206 out of 234, its use was followed by marked and unequivocal improvement: this improvement varying from a temporary retardation of the progress of the disease, up to a more or less complete restoration to apparent health.

The most numerous cases of lasting improvement were observed in the second stage, in which the tubercular deposit is beginning to soften, the common physical signs being defective movement and breath-sound, with marked dullness and muco-crepitation under the clavicle, or above the scapula, with more decided bronchophony and bronchial breathing towards the seat of the lungs. The effect of the oil, in most of these cases, amounting to near 100, is stated as remarkable. Even in a few days, the cough was mitigated, the expectoration diminished in quantity, the night-sweats ceased, the pulse became slower, and the appetite and strength were gradually improved. The first change manifest in the physical signs was generally a diminution and gradual cessation of the crepitus, the breath-sound becoming drier and clearer; but the dullness and tubular character of the breath and voice-sounds were much more persistent, and rarely exhibited a marked decrease until after several weeks' use of the remedy in conjunction with regular counter-irritation. The author has, however, convinced himself, in several cases, that consolidations have been removed, though in old standing cases the restoration has not been perfect. He states that, even where the health has been completely re-established, the physical signs of consolidation will often persist, and then, if unaccompanied by decided dullness on percussion, he has learnt not to contraindicate recovery, as they appear to depend on puckering of the pulmonary texture, and other changes due to inflammatory deposit.

In cases in the first stage of the disease, the author has used the oil with equally satisfactory results, but of these he cannot speak with equal precision, as many of them were only seen once.

The most striking advantage from the oil he finds to be in the third stage, even when far advanced, where consumption has not only excavated the lungs, but is rapidly wasting the body, with copious purulent expectoration, night-sweats, colliquative diarrhœa, &c. Of the power of the remedy in this stage, he quotes several instructive and encouraging cases. The total number of such cases amounts to sixty-two, in thirty-four of which the improvement is known to have continued up to a recent period. Eleven, after temporary improvement, relapsed and terminated fatally. The author further observes: "The results

above stated give to cod-liver oil, even as a tardative or palliative of phthisis, a rank far above any agent hitherto recommended, whether medicinal or regimenal. I have made trials of several other medicines of reputed utility in this disease, but their utility and harmlessness fall so far short of those of cod-liver oil, that I regard them now chiefly as subsidiary means, and the more likely to be useful in proportion as they facilitate the continuance of this superior agent."

2. *Mode of action of cod-liver oil.*—The author does not think it necessary to discuss the question whether the oil owes its efficacy to the iodine contained in it. To suppose that the minute proportion of this ingredient could be the curative agent, would savour of the absurdities of homœopathy, and besides most of the patients had taken iodine in one form or other previously to taking the oil.

It is commonly admitted, the author remarks, that the oil possesses the power of fattening those who take it for any length of time; but this nourishing influence extends beyond the mere deposition of fat. The muscular strength is sensibly increased, and the colour of the cheeks is improved. There is much reason, he thinks, to believe that the oil proves serviceable by supplying the fat molecules, which appear to be essential to healthy nutrition in forming the nuclei of the primary cells; thus supplying a fat which is capable of being readily absorbed and converted into a better plasma, as well as more readily conveyed by the blood to the vicinity of the tubercular deposits, the absorption of which it favours by dissolving the irregularly concreted fat of which the masses are partly composed.

One of the most remarkable effects of the oil, in the second and third stages of the disease, and in other forms of scrofulous disease, with extensive suppuration, is the speedy removal of the sweats and symptoms of hectic. This the author thinks it does by diminishing the unhealthy suppuration which is excited around the tubercle. The author's view of suppuration is, that it consists of a further oxidation of the exudation corpuscle, and he therefore explains the use of the oil in its offering a combustible material, and thus checking the process of oxidation of the tissues.

3. *Preparation and administration.*—The author repudiates the idea held by the Germans, that the brown oil is the most efficacious. He prescribes the pale oil, as free from taste and smell as it can be procured. To obtain this, he advises that the livers of the fish should be obtained as fresh as possible, the pale plump livers being preferred. These should be pounded into a pulp, and mixed with water of 120°, and filtered; after standing, the oil to be decanted, cooled to 50°, and again filtered. The process is to be quickly performed, and in closed vessels. The author begins with a teaspoonful, gradually increasing to a tablespoonful, floating on some aromatic water. He advises it to be taken about an hour and a half after each meal.

In conclusion, he repeats that cod-liver oil is more beneficial in the treatment of pulmonary consumption than any agent, medicinal or dietetic, that has yet been employed.—*Ranking's Abstract*, vol. ix., from *London Journal of Medicine*, Jan. 1849.

—

16. *On the Treatment of Pericarditis; especially on the Effects of Blood-letting and Mercury in that disease.* By John Taylor, M. D., Physician to the Huddersfield Infirmary. (*Proceedings of the Royal Med. and Chirurg. Soc.*, June 22, 1849.)—In this communication, the author has analyzed the forty cases of pericarditis, published in the Lancet in 1845 and 1846, in respect to the treatment of the disease. The cases are divided into two classes: first, those occurring in connection with acute rheumatism, the subjects of which were previously in good health; and secondly, the cases occurring in connection with renal disease, or in persons previously in a bad state of health. The patients in the first class, besides being in good health, were younger, and suffered from much fewer complications than those in the second class. Very few of those in the first class died, whereas all died in the second class. The conclusion from these facts is, that the age and previous health of the patients, and the nature of the complicating diseases, have more influence upon the favourable or unfavourable