The patient remains ignorant, to the present hour, of the fact that there was such a foreign body in her bladder as was extracted from it.

Hemorrhage from Various parts of the Body. By CYRUS WATERS, M. D., of Montgomery County, Maryland.

S., a remarkably healthy, robust negress, aged about 19, was caught away from home, in the autumn of 1839, by a hail storm, and took shelter in a spring house located in a ravine. The rain fell so very heavily that she was soon standing several feet deep in a stream of water, which was rendered very cold by the solution of the hailstones. She remained nearly an hour in this condition, but by a little care recovered without any serious indisposition. Her general health seemed, however, slightly impaired, though she rarely made any complaint. Early in Nov., from one to two months after the above occurrence, she complained for several days of headache and general malaise; her catamenia came on, but very soon ceased. She was now seized with violent paroxysmal abdominal pain, vomiting and constipation, with but little fever. After these symptoms subsided, slight bronchitis set in, and the intestinal secretions were in an unhealthy condition. In the course of the treatment, her gums became slightly affected by mercury, but there were no ulcerations. Now a miliary eruption broke out and annoyed her exceedingly. It soon disappeared. In about two weeks from their appearance above noted, the catamenia recurred and continued naturally. She now gradually and steadily improved, and resumed her domestic duties.

I furnish this history to aid in tracing the cause of the following attack.

Dec. 5th. Called to her for epistaxis of two days' continuance. This was preceded by pain in her head and back, and several small tumours about the axillæ, which were apparently seated in the skin, painful, gradually enlarging, and finally the skin over them cracked, and gave exit to a thin serum, containing the colouring matter of the blood, and possessing some tendency to coagulation. The blood, on my arrival, had ceased to be discharged from the anterior nares, which were stuffed with a soft dark coagulum, and I was shown about a pint and a half of dark, frothy, very imperfectly coagulated blood which she had spat out, after it had descended from the posterior nares into the fauces. About twelve hours before I saw her, a small tumour made its appearance upon the mucous membrane of the right cheek. From this a thin, partially coagulating blood soon began to ooze, and at the same time the base of the tumour extended. When I saw it, the appearance was that of a spongy fungous growth, an inch or more long, and nearly an inch wide, considerably elevated above the healthy surrounding membrane, covered with dark blood and giving issue continually to the same kind of fluid. The discharge from the nares seemed to have ceased. Within the last eight or ten hours the labia pudendi had become swollen and painful, and from their internal surface a similar fluid escaped, and was mistaken for the menses, although these had ceased only about two weeks previously. She complained greatly of debility; skin cool, pulse very feeble, slightly quickened, tongue coated.

6th. Tongue black, and looks as if covered by a thin coagulum of blood; the bleeding tumour upon the buccal membrane is diminished. There are several bloody tumours upon the skin, but the most remarkable one is situated upon the inner part of the arm near the insertion of the pectoralis major. A space three inches long, by one inch wide, is considerably elevated, soft, spongy, and giving exit slowly to the same dark, thin, imper-

fectly coagulating blood, from every point of its surface. This tumour is very painful; the pain extends down the arm, which is considerably swollen. The labia are much swollen, and closely resemble this tumour in appearance and discharge. The ordinary constitutional symptoms of excessive loss of blood are rapidly appearing.

7th. The loss of blood has lessened, and the constitutional symptoms of excessive hemorrhage are somewhat lessened. All the bleeding tumours are diminished, but the labia pudendi are the seat of excessive suffering from a sense of heat. She has some appetite.

8th. Considers herself rather improved. The burning heat of the labia pudendi is excruciatingly severe, and is aggravated by everything except the mildest possible applications. A blistered surface on the nape of her neck discharges some blood of the same appearance, and she has had an anal dejection of the same character. The discharge from the bladder has almost precisely the same appearance. There is much less discharge from the tumours and from the inside of the mouth. Micturition causes severe smarting and burning; appetite good.

9th. The hemorrhagic discharges recurred from the mouth, and were greatly increased from the rectum, vagina and urethra. Her chief complaint is of throbbing of the heart, jarring in her head, and burning of labia pudendi. Micturition every hour, but the discharge has scarcely any of the characteristics of urine, and is exceedingly painful.

10th. Very little discharge of blood except from the urethra; passes urine more easily and less frequently; constitutional symptoms of hemorrhage less distressing, (probably owing to minute doses of laudanum given in wine whey.) The blood discharged looks more florid and coagulates more firmly.

11th. This morning she was reported rather better. There was excessive swelling of the vulva, perineum and anus. She, however, died in the afternoon, rather unexpectedly to the attendants. Some thirty-six hours before death her olfactories became exceedingly acute, and vomiting was several times produced by odours merely perceptible to others. Her breathing was very much affected by the very slight dust arising from some dry lime which was agitated carelessly in the room. I was standing by the bed at the moment, and was barely conscious of the particles of lime in the atmosphere.

I have little to say in regard to treatment, for nothing that I used seemed to have much effect. She had always enjoyed a nutritious and wholesome diet. This was continued, and she was placed in as well ventilated a place as could be obtained, though not so well cleansed as was desirable. She took with, or without my directions, at different times, alum, acetate of lead, opium, camphor and other stimulants. I thought she was more benefited by cinchona bark and sulphuric acid than any of the various remedies used internally. She took a small quantity of ol. terebinth., but her stomach would not retain it. Externally, various astringents and stimulants were used. A saturated solution of camphor in whisky seemed most beneficial to the tumours upon the skin and in the mouth, but it could not be borne upon the labia at all.

I have not met with any description of purpura corresponding exactly with the present case. Circumstances did not admit of an examination of the dead body.

Had the mercury anything to do with the production of the disease?