restlessly spent, though the partial subsidence of the pain in the right side had continued; and that she had coughed considerably. On inspecting the blood, it was, in a most marked manner, buffed in its coat, cupped in its form, and fringed at the edges; in my reasoning upon these elements of course I did not forget the pregnant state of the party from whom the blood had been abstracted. Her face still presented the originally livid and puffed up appearance; her respiration was as short and hurried as on the occasion of the preceding visit; her pulse was still rapid and feeble; the action of the heart was normal. On applying the ear to the chest, the rhonchus crepitans was as audible as at first; equally so were the sibilant and sonorous rhonchi: the character of the sounds elicited on percussion were as dull as at first: on grounds, then, the same as those existing at my preceding visit, I repeated the bleeding to 10 ounces: this was immediately followed by relief in each of the unfavourable symptoms: the antiphlogistic regimen and medicines were ordered to be continued.

3, P.M.—On inspecting the blood, it was buffed, cupped, and fringed as strongly as that abstracted on the preceding evening. In every respect she appeared worse, and the heart was again palpitating with great force and frequency. From an alteration in the young woman's manner, my suspicions were excited, and after some equivocation, I was informed by her mother that her thirst had been quenched an hour previously by some warm rum-and-water, she, it was alleged, preferring that to an infusion of toasted bread;—"the ruling passion strong in death,"—the "ruling passion," I say, as the nutmeg appearance of her liver afterwards disclosed. Among the lower orders of London, no diseases are more frequently induced by indulgence in alcoholic drinks than this. Some pastry, too, had been given to her.

9, P.M.—Breathing less hurried; countenance less livid; pain in the side not complained of, and considerable pressure borne without occasioning pain; pulse, however, much more rapid, and weak. The bowels had twice acted freely. Pills ordered to be discontinued, and a little beef-tea, thickened with bread and boiled rice, to be given.

10, P.M.—Hastily sent for, and found that without a single emotion or symptom of an unusual nature, or premonitory pain, she had given birth to a fetus of between seven and eight months. Having afforded the assistance requisite in such cases I left her in a state of greater ease than any she had experienced since the commencement of her illness. On the following morning, however, at half-past three, she died; there was no flooding.

It having been bruited abroad that, on the morning of the day on which the deceased was seized with illness, she had been maltreated, kicked, &c., by a man whom she called husband; it, also, having been circulated by her relatives, that her illness was but incidental to her pregnancy—was but "the throes of labour"—and that she had been erroneously treated, an Inquest on the body was held by Mr. Wakley, the Coroner, he having previously ordered Mr. Bateman, Surgeon, Islington-green, to examine the body internally. Of this, I was not made aware, until the hour at which the Inquest was held, and consequently I was not present.*

Having at the Inquest given these leading views, Mr. Bateman next detailed the *post-mortem* appearances which the body presented sixty-three hours after death, and which were as follows:—"There was a slight lividity of the body; general *embonpoint*; slight bilious tinge; a slight lividity of the second toe of the right foot on its anterior surface as from a blow. The adipose tissue was abundant and of a yellow tinge; the mammae were both enlarged; there was a dark areola around each nipple; and the glands on division yielded some yellow milk. The brain was perfectly healthy. The right cavity of the pleura contained about $\frac{3}{4}$ ss of bloody serum and soft lymph; the lung was very dense in its structure, and, except at its uppermost part, completely hepatized; it sank in water except at its uppermost part; the bronchial membrane was reddened throughout, and its tubes for the major part were filled with slightly bloody mucus; some of the tubes in the lowest lobe, contained coagulated blood; the left cavity of the pleura contained $\frac{3}{4}$ ss of bloody serum, but no lymph; the pulmonary tissue of the left lung was hepatized nearly throughout and

the specific gravity of its major part exceeded that of water; the bronchial membrane was red throughout, and the tubes contained much frothy and bloody mucus, but no coagula. The pericardium contained $\frac{3}{4}$ ss of serum, the heart was of moderate size, somewhat yellow and flaccid, although of normal thickness; both auricles and ventricles contained coagula. The liver was of the usual size, and presented a nutmeg appearance when divided; the gall bladder was full; the pancreas and spleen were healthy; the kidneys were of the usual size, but bled slightly when divided. The stomach was full of air and liquid, it, as well as the bowels, was removed for the examination of their contents at home, in case that should be required. The uterus was large and soft; it was about six inches long, four wide, and three quarters of an inch thick at its thickest part; it was internally covered with a thin layer of coagulated blood about a quarter of a line in thickness, and almost uniformly so; there was no large coagula, and no portions of placenta remaining. The child measured sixteen inches, and weighed three pounds and a half; the navel was nine inches from the vertex capitis, and seven from the soles of the feet."

In this case there are many particulars worthy of being dwelt upon; the absence of cough in the first place; its presence after bleeding; the fallaciousness of the pulse; the apparent health, with lungs exhibiting such long-standing disease, &c., &c., but I have occupied too much of your space already.

DELIRIUM TREMENS—POISONING BY LAUDANUM— ERYSIPELAS—RECOVERY.

By WILLIAM RYAN, M.R.C.S. Eng.

ON Friday, the 27th July, I was called to see Mr. —, aged sixty-one, half-pay, R.N. He was in bed, drunk, with swollen and bloated features, small pulse, and difficult, stertorous breathing. During seven days he had drank six bottles of whiskey, commencing in the morning, a thing altogether unusual with him, and eating scarcely anything before evening. This was occasioned by fretting, in consequence of his business being for years in the hands of lawyers. He is about the middle height, well-formed, and muscular. On examination, I considered there was retention of urine, but the attendant thought it was only corpulence; and, therefore, introduction of the catheter was deferred till next morning. Little could be got on questioning him, as he lay on his back, but a turning up of the eyes, a clasping of the hands, and maudlin expressions of misery:—"Oh, I'm lost!—I'm lost!" &c., &c. A mixture was prescribed, consisting of tinctures of gentian and orange-peel, aromatic spirit of ammonia and calcined magnesia, with camphor-mixture, every two hours.

Saturday, 28th.—He is this morning in a state of great nervousness and depressed spirits, exclaiming that he is lost; tremblings; complete loss of appetite; tongue loaded with a white viscid matter; breath extremely offensive and alcoholic, making, with the cuticular exhalations, an atmosphere of their own; pulse quick and weak; bowels confined. Has not been able to pass urine, of which I drew off three pints, of a high colour and strong smell. I reasoned with him, begging him to call all his strength of mind to bear on the subject; representing the frightful consequences of perseverance in such a course; and prevented him getting whiskey till after dinner-hour, when, some broth being taken by him, he was allowed a glass of whiskey-and-water. His medicines were continued during the day, and at night he got a pill of three-quarters of a grain of chloride of morphia, and four of camphor. Precautions regarding razors, &c., &c., were at the same time taken, and had I not depended much upon his strong sense of moral responsibility, I should have taken still further. Inability to pass water, at my next visit; catheter to be again used.

29th.—Symptoms similar to those of yesterday; ordered black draught; soups; whiskey-and-water as on previous day; the morphia at night. In the evening, I felt satisfied that he had taken more whiskey, but was assured by the attendant that he had not, the row of "six" empty "black bottles" being at the same time pointed out. The patient seemed anxious, and watched my movements uneasily, which made my suspicions stronger. I, therefore, insisted on opening a trunk, and there found a bottle half-full of whiskey, the remainder he acknowledged having taken. This was removed, and I determined to give him no more; but as he hoped to get money by next Tuesday, and pleaded his uncertainty on that head as the cause of his depression, promising after that to give it up, I allowed him some after dinner each day. I should mention that, on the 28th, he took two cathartic pills, which were followed by bloody stools and prolapsus ani.

* The order to open the body was sent to Mr. Bateman, as a medical practitioner who had not been previously consulted in the case, the relatives impugning the conduct of the medical gentleman who attended the deceased woman in her illness. It is a general direction, in all such cases, to the practitioner opening a body, that he shall inform his brother-practitioner on what day and hour he will perform the autopsy. The omission on the present occasion must have been accidental. The verdict of the jury exonerated all persons from blame in relation to the death.—ED.

30th.—He begged for croton-oil as a purge, which was given. Inability to pass water; better in other respects; ate some dinner, and took whiskey-and-water; the morphia at night.

July 1st, *The Tuesday*.—Quite a different man this morning; rose early, and walked a mile for his money, the getting of which rendered him quite happy. His gratitude for the care taken of him was extreme, and I hoped he would drink no more. Catheter still necessary; once he passed water while at stool; occasionally asks very irrelevant questions; broths, &c. His medicines have been continued, with, occasionally, a mixture of tinct. gentian, sesqui-carbonate of soda and ammonia, and infusion of chirayta.

July 2d.—This morning I found him completely prostrated from the "last night's dose," and making a low moaning noise. Under the bed we found a bottle, one-fourth full, of whiskey; the remaining three-fourths he had taken the preceding night, having brought the bottle full, on his return from a walk the evening of yesterday, without the knowledge of any one in the house.

5th.—Kept the whiskey from him up to this date; he is consequently getting better; castor-oil yesterday; tongue getting cleaner; bowels moved. Ordered a mixture of aromatic confection, tincture of opium and compound tincture of cardamoms, with camphor-mixture.

6th.—Better. He now informs me he had such another "bout," seven or eight years ago, and after recovery remained in an asylum three months. This was rather a startling announcement, but I believe he found inducements in the comforts of the place, and went more from choice than necessity. Blue pill at night, and black draught in the morning.

7th.—Still retention of urine; this, I am persuaded, has arisen more from injury by over-distention of the bladder, from the insensibility of muddling drunkenness, than from any prostatic enlargement. Tincture of cantharides, solution of potass, tincture of calumba, infusion of chyrya. Mix. Two table-spoonful three times-a-day. One ounce castor-oil and forty drops laudanum at night.

8th to 13th.—Occasionally, castor-oil and seidlitz-powders, with the opiate at night. In my absence, yesterday, endeavouring, to introduce the catheter, he made a false passage, and a large quantity of blood came away. He was greatly alarmed, thinking he must "bleed to death;" and not finding me, the messenger took another surgeon, who ordered cold applications, &c.; he had his fears, as well as those of the family, which were extreme, quieted on my return. I subsequently found no difficulty in introducing the catheter; opiate at night; he seems depressed and desponding.

15th.—Seems heavy, as if under the influence of some sedative; I expressed my opinion to the attendant that something was wrong, but that I did not consider it occasioned by whiskey.

16th.—During the last three evenings, he walked out for a couple of hours each evening. Last night he went to bed about eleven o'clock, saying he himself should extinguish the light; at twelve, the attendant seeing from the outside, a light still in his room, and, being alarmed, went up to take it away. When she reached the door it was locked, and the light immediately after disappeared; at this time, he was snoring. About ten this morning I tapped at his bedroom-door, but received no answer, yet considered I heard a noise. I repeated the knocking more loudly, without eliciting any answer; and was then informed that a gentleman, who slept in the front room, on the story below, was awake during the night by an extremely loud snoring, which he considered to be outside his door; but that on going out on the landing, and finding it proceeded from the patient's room, he returned to bed. Being told it was only his "humour" not to be now disturbed, and being requested to call again at twelve o'clock, I did not proceed further. At twelve, I called. There was as yet no noise heard in the room, and no answer being returned to the loudest knocking with sticks, &c., against the door, and the wall at the head of his bed, I expressed my conviction that he had taken laudanum, and caused the lock to be broken. Mr. — lay on his back in bed, and appeared to have undressed in the usual way; he was in a state of total insensibility. The face was greatly swollen, and had an unmeaning ghastly impression, and livid lips. He was bathed in a cold clammy sweat, the pulse being slow and soft, and the breathing slow and laboured, from the amount of mucous secretion accumulated in the bronchi, which caused a noise equal, and in all respects similar, to that of the "death rattle." The pupil was contracted. On the table lay a two-ounce phial, unlabelled holding half-a-drachm of laudanum, beside it was a wine-glass with the evidence pure laudanum in it; the candlestick was on the table, the

light having burnt out at the moment the servant reached the door the previous night.

We immediately placed him in a chair, and administered two scruples of sulphate of zinc, with a spoonful of mustard, in strong coffee, repeating the two latter in five minutes; in eight minutes we repeated the sulphate of zinc; both were ineffectual. I then used the stomach-pump, and drew off a considerable quantity of fluid, of the colour and smell of the liquid given. There was no smell of laudanum. The stomach was several times washed out, whiskey and compound spirit of ammonia being thrown in, and cold water being dashed on the face and chest. These things seemed to revive him, but on the least cessation from our efforts, the head, as he sat on the chair, fell backwards, the jaw dropped, leaving the mouth wide open, and he was again asleep.

We now placed him between two supporters, and endeavoured to walk him about, but his legs afforded him little, and at times no support. However, we kept him moving for a couple of hours, after which, he was allowed to lie on the bed in a reclining position. Towards evening we had him up again, still unconscious, but the peculiar sopor of opium, as contradistinguished from coma, was now evident in our ability momentarily to rouse him by any sudden shock, after which he fell off to sleep again. The cold aspersions were continued, aromatic spirit of ammonia being administered, intermitted by draughts of whiskey, vinegar, and water; broths frequently given.

17th.—On my visit this morning he was still completely under the influence of opium; sopor; pulse better; communicating a thrilling sensation to the touch. He could be suddenly awakened, and as suddenly fell off again. We got him up and after cold-water *douches*, &c., supported him into another room and back. Pupils still contracted, the eyes staring and vacant; the face death-like. Towards noon he seemed to know some of us if kept awake by sudden shakes. In the afternoon he could answer a little, though incoherently, but was immediately asleep if not kept shaken. On asking where he got the laudanum, he answered, in a muttering tone, scarcely to be understood—"two or three places;" if pressed further, he would reply—"Holborn;" if further—"Oxford-street;" &c., &c., and if we persevered still further we could get no answer, the impressions becoming fainter on his senses. At night he was rather better, the same stimulants with broths being continued. *This day he passed involuntarily in the bed.* Phlegmonoid erysipelas has appeared on the left buttock in three places; in a phlyctenoid form on the right shin, and on the left ankle. Continual picking at bed clothes; lips frequently moving, with a low, scarcely audible muttering.

18th.—Still partially under the influence of opium. On asking if he took it with a bad intention, he replied—"God forbid." "Why did he take it?"—"He could not tell, but thought it would make him go to sleep." He is disinclined to tell where he got the laudanum, from a fear of getting any one into trouble. Phlyctenoid large on shin; erysipelas on buttock very painful. Applied nitrate of silver; fomentations ordered; porter; castor-oil. Picking at bedclothes and muttering as before.

19th.—Influence of opium nearly gone; his memory seems injured; he begins to despond again, saying, he is lost. Pulse better, but he looks sadly cut up. Allowed porter in early part of day, and whiskey-punch about four o'clock. Catheter still required, but when at stool he can pass some urine. Tongue improving. Picking at bed clothes as he dozes, and now, as it were, not finding the object of his search, he opens his eyes to look for it.

22d.—Improved, but much depressed. He is re-assured on reasoning with, and giving him some comfort. The blisters on the shin broke the day before yesterday. Oedema of the legs, first noticed a week since. He now complains of great numbness of the index and middle finger and thumb, and cannot take hold of any thing with them; "he has no feeling in them;" they appear drier and more bloodless than the others. Stimulating liniment applied; the caustic destroyed the epidermis, leaving the surface raw and painful, but otherwise better. He would not allow the knife.

23d.—Better in all respects; occasionally, by forcing, he can pass some water, but the catheter is still necessary.

24th.—Left for the country, much improved in looks. Numbness of the fingers still continues; has had erysipelas heretofore. He says that to the nightly opiates given by me, he added, on two nights, some of his laudanum, but that at least one ounce and a half was taken on the last night.

Sept. 8th.—Heard from him, he is recovering, but, he says, slowly.

The circumstances attending this case make it of moment.

The patient is known to be asleep in less than an hour after entering his room, and is not seen for thirteen hours after taking the poison. We thus have him in the advanced stage of poisoning by opium, and we notice complete insensibility after that number of hours, and the ghastly expression observed at that advanced time. We see the great lividity of the lips from the protracted obstruction to respiration and consequent imperfect oxygenization of the blood, caused, in the first place, by the paralyzing effects of the poison, subsequently rendered more difficult by the increasing accumulation of mucus in the bronchi—thus threatening death by asphyxia. We have all the more severe symptoms of poisoning; and an index to the nature,* as well as the quantity, of the drug taken, in the two-ounce phial on the table. There is also an opportunity of observing how soon the person became soporose, and the length of time the poison influenced the system, and how much it was modified in its operation by the previous state of partial delirium tremens, in consequence of alcoholic drinks; as well as how much the usual symptoms of a poisonous dose of opium were affected by the state of the system,—*stertor* being one of the first things noticed by the inmates, the attendant hearing him snore at twelve, and a gentleman in a room underneath being awoken by its intensity at a further hour of the night.

We have thus the apoplectic tendency of the alcoholic over-coming at first the more usual symptoms of the still more potent poison. From the state in which the patient was found he could scarcely have survived many hours without assistance. The ordinary duration of fatal cases is averaged at from seven to twelve hours, and it is thought if patients pass that period they usually recover,† but authors record fatal cases to twenty-four hours, and it must be ever at best a matter of great uncertainty, so much depending upon the constitution of the patient, as to the ravages committed. A case is given where, the patient, being vomited and kept awake the first, died on the third day. Two ounces *vin. opii* had been taken.‡ Another case is recorded where a person was made to vomit in twelve hours, and regained his senses completely, still the body became paralyzed, and he died on the tenth day. In cases of poisoning by opium, where the brain is much affected, we have paralysis, as in the above partial case of palsy of the fingers, this gradually wears away as the person recovers. Corvisart relates a case where palsy of one arm continued four days, in which case, he says, the brain must have sustained more injury than usual. Regarding the time elapsing before a person becomes soporose, much too must depend on circumstances, both as regards patient and dose. In this case, scarcely an hour could have gone by. M. Ollivier gives one where the person was completely soporose in half an hour after a similar dose (an ounce and a half of laudanum); and Corvisart one, where no great stupor took place for more than an hour after a still larger quantity had been taken. Christison is not acquainted with any longer period in pure poisoning by opium, but thinks it may be much longer if the person was excited by intoxication from drinking spirits.

It may here be remarked that much will depend also on the stage of the drinking of the spirit. If the person be strong and healthy, and excitable by a fair quantum of alcohol, and able to bear it, the dose of opium may be longer in showing its effects than in the same person worn out and wearied, by a week's deep debauch, from quarts of whiskey. The brain of the former can withstand, that of the latter courts repose from, the opiate. On the other hand again, where the madness of delirium tremens has really commenced, the system may withstand the poisonous effects for a longer period. Corvisart quotes from Mr. Shearman a case where an habitual drunkard took, while intoxicated, two ounces of laudanum, and experienced no sopor for five hours, but five hours after became insensible, and died in ten hours after taking it. The effects of the poison are altogether modified by delirium tremens, in which affection medical men, and particularly the Americans, give large doses; one to four drachms of tincture of opium being given by one (Dr. S. Brown), and ten, fifteen, or even twenty grains of solid opium by another (Dr. S. Jackson), every two hours; the latter says that four ounces of good tincture of opium, given partly by mistake, in twelve hours caused a sleep of twenty-four hours, and perfect recovery. Dr. Copland expresses, as well he may, surprise that it was not the sleep of death.

My patient was under the influence of opium on the third

day, and, contrary to what generally takes place, he was not affected on his recovery by nausea, vomiting, or giddiness. The third day is longer than usual, but is yet frequent according to Corvisart, and Dr. Chowne cites an instance* where a young woman continued under the influence of the poison to the fifth day.

The treatment pursued need not be particularly noticed, being that usually followed. Infusions of nut-galls and vegetable astringents, if at hand, are recommended previous to the exhibition of emetics, but it may be questioned how far they can be of use after the lapse of many hours, where absorption of the poison, particularly if taken in a fluid form, must have already taken place. If solid opium be the form taken, absorption will more slowly take place, and more scope will be afforded for the beneficial effects of astringents. Of course emetics, and particularly the quickly acting as well as stimulating ones, will be our first means, and these are combined in the mustard and sulphate of zinc. The zinc-emetic in some cases of poisoning by alcohol, as well as by opium, I have found very inefficient, nor can we expect much where the long operation of the drug paralyzes, according to Dr. Williams, "the sympathies exercised in vomiting." In the present case, considering the laudanum already absorbed, I hoped little either from the emetics or pump, but trusted more to the cold effusion, stimulants, and motion,—but they can be of no harm, and if the emetic fails, it may be as well to wash the stomach out by means of the pump, using for that purpose stimulants: viz. coffee, ammonia, brandy, decoction of horseradish, &c., &c. In this case, the patient revived much after these things had been put in requisition. There can be no doubt as to the efficiency, as a restorative, of cold effusion. Dr. Bright mentions a case where recovery took place by this means, when an ounce and a half of laudanum had been taken. If called to see a person shortly after taking a poisonous dose of laudanum, of course the stomach-pump is the most invaluable of our means of recovery, and perhaps in all cases, whether called early, or after twelve or thirteen hours, as in the present case, have elapsed, it, as well as emetics, should be put in requisition, as although the laudanum itself might, after the lapse of hours, be absorbed, yet it might have been taken soon after a hearty meal, and so suspend the process of digestion; we by such means relieve the stomach of ingesta, which go far to favour the supervention and continuance of coma.

Pimlico, 1845.

GONORRHEA.

By J. P. McDONALD, Esq. M.R.C.S., Bristol.

I HAVE seen, in the last Number of THE LANCET, an article on the action of balsam of capivi in gonorrhœa copied from the *Medical Gazette*. That it (balsam of capivi) is a very valuable medicine in that disease there can be but little doubt; but a remedy I have lately heard of, and tried most successfully, will, I think, when it becomes more known, supersede all others in the cure of gonorrhœa. The remedy I refer to is that of smearing a bougie with ointment of the nitrate of silver,† introducing it into the urethra for about three inches, and letting it remain there a minute or two. I have found from two to three applications complete the cure, and if in the very acute stage of the disease one application is generally sufficient. This mode of treatment is equally applicable in all stages of gonorrhœa. The following two cases will be sufficient as illustrations.

J. B.—, mate of an American ship, applied to me to be treated for gonorrhœa in the acute stage; the discharge had commenced about three days previously, accompanied with the usual scalding during micturition. He had purged himself thoroughly, lived low, kept his bed, and taken small doses of balsam of capivi and sweet nitre; but the symptoms had so much increased in severity that he sought my advice, when I found the glans penis intensely red, the prepuce swollen considerably, the discharge green, mixed with a little blood, and he described the scalding as the "passing of boiling lead along the urethra."

I ordered him to remain in bed for that day, take plentifully of mucilaginous drinks and the following draught every six hours:—Gum arabic mixture; copivi; solution of potass; tincture of hyoscyamus, for a draught; and to apply lotion to the prepuce.

The following day I found him no better; he complained himself of being worse. I then introduced the bougie, smeared with the nitrate of silver ointment as before described; the pain was excessive for about half an hour after it had been with-

* Mr. — undressed as usual, then poured the laudanum into the glass drank it off, and got into bed.

† Christison.

‡ London Medical and Physical Journal, vol. xxviii., p. 81.

* Lancet for 1833, p. 705.

† R. Argent Nitratis ʒj; Adipis ʒj; Misce.