SUCCESSFUL TREATMENT OF ACUTE RHEUMATISM BY LEMON-JUICE.

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My attention having been drawn to the treatment of rheumatism by lemon-juice, by my friend, Dr. G. O. Rees, and more recently again by his pamphlet on the subject, I offer a case selected from many as illustrative of its power and utility.

Mrs. T—, a small delicate woman, aged twenty-six, had suffered, for several winters past, from severe attacks of acute rheumatism, which lasted during various periods, from five weeks to two months.

She had been treated in various ways for these attacks, and they had yielded to either colchicum, or opium, iodide of potassium, or mercury, or to all combined, but always left the patient very weak, and very susceptible of cold. I was called to her on the 28th of March, 1850, after she had been ill for ten or twelve days. She was suckling an infant of six months old, and had been in feeble health ever since her accouchement, which took place at the seventh month of gestation.

I found her with a pulse at 130; skin hot, and profusely perspiring; tongue white and coated; thirst excessive; urine scanty, clear, and not high coloured; bowels confined; pain intense, every joint set fast, and the patient unable to move an inch without assistance.

From previous experience of the effects of lemon-juice, and from fear of reducing her powers, I determined to use it in this case, and gave her half an ounce every four hours, combined with twenty minims of tincture of hyoscyamus, in a drachm of water. I ordered her lemonade for drink, and arrowroot for diet.

March 29th.—She has passed a restless painful night; no sleep; symptoms unabated; bowels not relieved. Ordered a colocynth pill, and a draught of rhubarb with tartrate of potash, next morning. To continue the lemon-juice.

30th.—Bowels freely relieved; the rheumatism unabated; pulse still 130; complains of pain over the region of the heart; the stethoscope gave no indication of pericarditis, but, to relieve the pain, I applied a blister to that region.

31st.—Still in great pain; pulse 125; tongue cleaner, and less thirsty; no sleep; bowels purged four or five times. Ordered ten grains of compound powder of ipecacuanha at bed-time. The infant was also troubled with griping and diarrhoea, which was easily relieved by an aromatic astringent.

April 1st.—The pains somewhat abated; pulse 120; tongue cleaner; but the joints of the patient still completely set fast. Increased the lemon-juice to six drachms, every four hours.

2nd.—Decidedly better; pulse 108; tongue cleaner; thirst gone; pain less, and able to turn in bed without aid. The improvement continued through the succeeding days, and, on the 5th, the dose of lemon-juice was reduced to four ounces every five hours.

From the 7th instant, the patient continued to improve rapidly; her pains left her; her appetite returned; her pulse fell to ninety; and, on the 10th, she left her bed.

On the 15th she got down stairs, and I ceased my attendance, but I visited her on the 25th of May, and found that she was, in spite of very cold, wet, and unpropitious weather, free from all pain, and in her usual health.

Though nothing could be more satisfactory than the progress of this case, I am unable to point out the *modus operandi* of the medicine. As soon as the system came fully under its influence, the pulse fell, the fever abated, the pains subsided, and the appetite returned, yet nothing further noticeable took place. The secretions were but little affected, except that the urine, from being very scanty, became copious, but there was no deposit of any kind in it. Here is a patient who usually has not got quit of her attacks under six or eight weeks, and is then left weak and emaciated, but who, under lemon-juice, is, at the end of nineteen days, down stairs, and very little the worse for her attack.

Should this medicine stand the test of time and hospital practice, and we be able to avoid either half poisoning our patients with colchicum, stupifying them with opium, or enervating them with mercury, a great boon will be conferred on the suffering multitudes of this variable climate.

Norwich, 1850.

DEATH OF M. PREVOST.—The names of Prévost and Dumas are well known to the cultivators of chemical science. We are sorry to announce that M. Prévost has just died at Geneva, in the sixtieth year of his age.

ON A CASE OF ICHTHYOSIS CORNEA, OF UNUSUALLY LARGE SIZE, ATTACHED TO THE OCCIPUT.

By CHAS. A. DALBY, Esq., Surgeon, Ashby de la Zouch.

In May, 1847, I was consulted by Mrs. P—, aged seventy, small in stature, and a martyr to rheumatism. She told me she had "a horn at the back of the head," which she wished me to see. On examination I found it to be a fine specimen of ichthyosis cornea, firm and horny in texture, of a brownish colour, and measuring six inches in length, and two and a half in circumference. The annexed drawing is a faithful representation.

Three years previously to this date, (May, 1847,) Mrs. P— perceived an enlargement on the occiput, which proved to be an encysted tumour, and, as it appears, formed the base of this excrescence. From that period to the time I saw her, the growth was very gradual, but attended with great pain; so severe was it, that for months she could not be induced to lay her head on the pillow. This continued for five or six weeks longer, when a spontaneous separation took place, leaving a small round opening in the scalp, unattended with any discharge, and which appeared to be gradually closing. Two months, however, had scarcely elapsed, when a new growth was perceived, which slowly increased to about half the size of the former one, and fell off in April last in the same way. This last formation presents (with the exception of being smaller) much the same appearances as the other; its growth, however, was unattended with pain.

I visited my patient yesterday, (August 27,) and found only a small cicatrix remaining. I should observe that Mrs. P— in each case was frequently urged to have the excrescence removed, and the secreting surface destroyed, to effect a more speedy recovery, but always objected.

Ashby-de-la-Zouch, Aug. 28, 1850.

Foreign Department.

The Cause of Sea-Sickness.

M. SEMANAS, of Lyons, has just published a volume of 414 pages, wherein he endeavours to prove that sea-sickness is owing to a kind of maritime intoxication, analogous to marsh poisoning; and he advises quinine against the affection. The author has gone so far as to assimilate sea-sickness with the cholera, yellow fever, the plague, &c. It is a pity that people should so cruelly waste their time and trouble.

The Faculty of Medicine, of Montpellier, has just lost by death one of its most eminent members, in the person of Dr. Raffeneau Delille, Professor of Botany, Corresponding Member of the Academy of Sciences.

The Stamp on French Medical Papers.

The stamp duty on periodical publications had been abolished soon after 1848; it was, however, introduced again, a few weeks ago, and is obligatory both for scientific and political periodicals, whether they be transmitted by post or not, as a trifle more is to be paid for postage. The medical press of Paris have been loud in their complaints, but to no avail.