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Original Communications.

A CASE OF POISONING WITH GELSEMINUM SEMPERVIRENS.

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On the night of December 5th, 1869, I was called in great haste to see Mrs. F., a former patient of mine, who was said to be dying. In the course of a few minutes I arrived at her bedside, and found her in the following alarming condition: Totally unconscious; breathing stertorous, and very imperfect; countenance of livid paleness; lower jaw drooping, leaving the mouth wide open; eyelids partially closed, and motionless; pupils moderately dilated; pulse 100 per minute, regular, but weak. On making hasty inquiries, I ascertained that she had been taking some medicine from a quack herbalist, who recommended it, in the choice English of that refined sect, as being able to "knock pain higher than a kite." Being satisfied that the case was one of poisoning with some narcotic, I attempted to administer an emetic of sulphate of zinc; but owing to the great difficulty in swallowing, I did not succeed in getting enough down to produce emesis. Friction and stimulants were then resorted to, and in about one hour and a half consciousness began to return. Treatment was continued, but recovery was not complete for several days, the principal complaint being of great prostration, and muscular weakness, particularly of the elevators of the lower jaw, and eyelids, and the muscles of the arms. After the return of consciousness, intelligible speech was at first only possible when the jaws were supported. The tongue also was stiff, and the voice thick and guttural. The patient stated that before she became unconscious objects appeared double, and then she grew by degrees completely blind. She thought, and naturally enough, that she was dying. Subsequently I saw the "doctor," and learned from him that he had given gelseminum sempervirens. He said he had prepared forty drops of the fluid

extract in a bottle, and that, contrary to his directions, the patient had taken it all in the course of a few hours. I place no reliance upon his statement as to the amount, for he was most thoroughly frightened by the occurrence, but I have no doubt from the symptoms that gelseminum was the drug administered. The patient asserted positively that he gave her no specific directions as to dose, or intervals, but told her to take it when she had pain, and if on holding up her finger and looking at it, it did not appear double, she was all right, and could take more.

I satisfied myself, notwithstanding the denial of both parties concerned, that he had procured an abortion upon the woman, and gave the medicine as an anodyne after the expulsion of the ovum. It seemed at first as though the case would inevitably prove fatal; nor do I see now how recovery could have taken place without remedial interference.

I should not have been surprised at any time within an hour after my arrival to see the jerking respiration cease, and life become extinct.

The effect of the poison, it will be noticed, was to produce a general feeling of numbness and oppression, followed by double vision, loss of sight, paralysis of the muscles of voluntary motion, with complete insensibility to all external impressions. The paralysis of those muscles whose function it is to elevate was more persistent than that of any others. It is easy to explain the bad respiration by the condition of muscular paralysis which existed. There did not seem to be any direct sedative action of the poison upon the heart. In regard to this point, I am inclined to agree with Dr. Bartholow in the opinion that when the cardiac movements are depressed it is the result of insufficient respiration.*

I gave stimulants (brandy, am. carb., &c.,) on account of the alarming prostration, and because I did not know what else to do. Should another patient similarly affected come under my care, I should pur-

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* Practitioner (London), Oct., 1870, p. 208.

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sue the same course, with the addition, if it were possible at the time, of the use of galvanism, an agent found so beneficial in his own case by Dr. J. T. Main, of Unity, Maine.*

The notes of this case were taken chiefly at the time of attendance. Since then I have seen reports of several other instances of poisoning with the same drug, some of them fatal.† They all agree essentially with mine in the character of the symptoms presented. It is altogether probable that my patient had taken much more than forty drops of the fluid extract.

Hospital Reports.

BOSTON CITY HOSPITAL.

Surgical Cases in the Service of D. W. CREEVEN, M.D.
Reported by Mr. C. B. BELT, House Surgeon.

CASE I.—*Lupus; Galvano-Cautery; Disease Retarded.*—P. II., æt. 50. Fifteen years ago, disease began over the left ala nasi, and increased rapidly. Has been treated at various institutions. Was at the Massachusetts General Hospital, where a plastic operation was performed. The disease has extended rapidly, since the operation, towards the eye; has destroyed entirely the ala nasi, leaving a cavity that extends upwards and backwards. The disease has also affected the right ala nasi. Nitrate of silver was freely applied and continued every other day, but without avail. He was also put upon cod-liver oil.

After a fair trial of the nitrate of silver, the galvano-cautery was applied, under ether, and the wound dressed with lin. calcis. The patient did not suffer so much pain after the galvano-cautery as after the nitrate of silver. The cauterization was followed, apparently, by a retardation of the disease.

Two weeks following the operation, the disease was found to be again advancing, with renewed vigor, towards the right side of the nose. The patient was again etherized, and the fumes of the ether having been allowed to pass off, the nose was again touched freely with the galvano-cautery, and a pendulous flap, which was cumbersome, was removed. Cold-water dressing. The operation was followed by little pain. After four weeks the patient was

discharged, "relieved," the edges of the disease presenting healthy granulations; no new tubercles or ulcerations having, as yet, appeared.

CASE II.—*Compound Fracture of the Radius; Recovery.*—Richard L., æt. 32. From the explosion of a copper retort, a portion struck the patient's left arm and produced a compound fracture at the lower third of the radius, and also caused considerable laceration of the surrounding tissues. No large vessel was injured. It was found impossible to reduce the protruding part of the radius, without sawing off a portion three-fourths of an inch long. A counter opening was made upon the dorsal aspect of the arm and a seton passed through. As there was considerable contusion and swelling of the whole arm and hand, it was also thought advisable to make an incision upon the dorsal aspect of the hand. Arm laid upon a straight splint, and cold water frequently applied. Considerable swelling and pain subsequently. A large poultice was then ordered. In a week several sloughs had separated, and the condition of the patient was excellent. In three weeks the arm had got into a much better condition; less pain and suppuration, and a splint was constructed to abduct the arm and draw the ends of the radius apart, thereby making it quite straight, and giving an opportunity to fill the gap with new bone. Patient steadily improved, and, with the exception of an occasional increased suppuration from any over-exertion, the compound opening granulated well and rapidly filled up. At the end of thirteen weeks the hand had so far recovered that he could use the arm with considerable freedom, and he was discharged.

CASE III.—*Fracture of Cervix Femoris; Recovery.*—Catharine S., æt. 47, slipped upon a piece of ice, and fell from three steps, coming with considerable force upon her right hip, causing an inability to walk. Remained at home without treatment three weeks. On entering the hospital, there was a characteristic eversion and one and a half inch shortening. Under ether, the trochanter major rotated freely with the shaft of the femur, and a distinct crepitus was felt within the joint. Several bed-sores had formed over the sacrum. Seven pounds extension and a long outside splint were applied. As the patient had incontinence of urine, it was with considerable difficulty that the limb was kept in a state of quietude. Everything went well, with the exception of an oedematous condition of the left leg. At the end of six weeks all the

* Boston Medical and Surgical Journal, April 15, 1869.
† American Journal of Pharmacy, Jan., 1870. American Journal of the Medical Sciences, Jan., 1867.