force, around which all her other systems and functions turn, and to which they are in reality, to a certain extent, but subsidiary—so subtle and so easily disarranged by even slight external causes, that the real wonder is not that so many women are invalid, but that any are well. "*Propter uterum*," said Van Helmont, "*est mulier*." I would not so far commit myself as to accept his statement in all its bearings, but I have no hesitation in averring that in the uterus we shall find the key to many a case of mental malady, a most efficient "cause of cerebral disorder within the patient (her)self."

These several points I commend to the close scrutiny, confirmatory or contradictory, both of the profession at large, and of the specialty devoted to the study of the insane. I think I am already sure of the support of the latter; I have little doubt that the former also will, upon investigation, as heartily acquiesce in the acceptance and general adoption of my formulæ.

CASE OF CEREBRO-SPINAL MENINGITIS.

[Reported to the Boston Society for Medical Improvement, March 28th, 1864, and communicated for the Boston Medical and Surgical Journal.]

BY GEORGE HAYWARD, M.D., BOSTON.

THE patient was a little boy, about 5 years and 11 months old, attending one of the public schools; he had been well fed and clothed, his parents being in easy circumstances, and had undergone no particular fatigue or exposure. He was not a very robust child, and had had, during the winter, a succession of colds; but, on Saturday morning, March 27th, seemed to be as well as before, and went to school as usual. After his return from school, about 12½, P.M., he told his father that he "had a bunch on the back of his head," and complained of being cold. His father could find nothing unusual about his head, and took him to his mother's room, where he was wrapped up warmly and placed in a chair by the fire. He still complained of pain in the head and chilliness, but ate a pretty hearty dinner, which, however, he vomited up not long after. At 5, P.M., he was put to bed, and the headache, with a feeling of general restlessness and distress, continued to increase, accompanied by occasional nausea, until 11, P.M., when his parents noticed that his mind was affected.

Things continued in this way, with the addition of considerable difficulty of breathing, until 1, A.M., on Sunday, when I was sent for and saw him soon after. I found him lying upon his back in bed, with a dark, pale, almost livid countenance; pupils of eyes much dilated and insensible to light, and the vessels of the conjunctiva very much injected with blood; pulse 120, soft and easily compressible; respiration labored and hurried; and on placing my ear on the lungs they seemed congested, as if the bronchial tubes were very much obstructed by fluid. On examining his skin to see if there were traces

of any eruptive disorder, I found upon his left arm, near the shoulder, several small round dots of a purplish hue; the largest not being bigger than a pin's head, and a few more, less marked and smaller, were found upon the forearm and body. I called his mother's attention to these spots, and continued to watch them through the night, as they seemed to me to be different from anything I had ever seen before.

As soon as it could be made ready, I applied a large mustard poultice over the whole chest, and after a time the breathing became less rapid and laborious. His pulse soon became very feeble, so that, at times, it could not be felt at the wrist, and I gave him hot wine and water, brandy and water, and wine whey, and applied flannels wet in hot brandy to his bowels, and a jug of hot water to his feet. After a time his pulse improved, the dilatation of the pupils ceased, he appeared to understand when spoken to clearly and distinctly; he tried to speak himself, and did articulate imperfectly a word or two.

About this time he had a discharge from the bowels in the bed, but his mother thought that it was not altogether involuntary, and that he had tried to give notice of it, but was unable to make himself understood.

As, from what was said to me, I thought that he had taken something in the afternoon which might be injurious to him, I gave him an emetic of powdered ipecac which vomited him after some time. He had before this shown symptoms of nausea, but did not seem able to vomit.

The remedies above spoken of were continued, the mustard poultices being applied occasionally to the chest, stomach, bowels, and back of the head and along the course of the spine, and the stimulants administered frequently in such quantities as he could be made to swallow.

In the mean time the patient was getting worse; he seemed to lose all consciousness of those about him, and a purposeless jactitation came on, causing him to toss without object from side to side of the bed. I noticed a tendency to throw the head back, and also that he had at times distinct spasms, causing him to stiffen his arms and clench his hands, set his teeth and roll his eyes up; I saw at no time any strabismus, or frothing at the mouth. The dilated state of the pupils I noticed at first, may have been caused by his just having come out of one of these spasms, without its being noticed, as the eyes had usually an unnatural look after they had passed.

The decubitus at this time and for the remainder of his life, was almost entirely upon his side, usually his right side.

The small round purplish spots which I noticed on the left arm continued to increase in size, and to come out in great numbers, reminding one of the way the stars come out as night draws on, new ones constantly making their appearance. They were for the most

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part round, clear and distinct, not raised above the skin, and seeming to increase independently, and not by coalescing with each other. There was upon the right fore-arm an irregularly-shaped blotch, very like purpura, about an inch long by one third of an inch wide; and there were several more like this on the body and limbs, but they were the exceptions.

There is but little to add to the case, except that the spasms became more frequent and severe, the tendency to opisthotonos greater, the spots more frequent and larger, and the difficulty of making him swallow his nourishment, to which beef-tea had been added, much greater.

In the course of Sunday forenoon I became convinced that this was a case of cerebro-spinal meningitis, such as had occurred among our soldiers at Newbern, N. C., and that it would soon prove fatal. This opinion I communicated to Dr. Storer, who saw the patient in consultation with me; and, after a careful examination of the patient, he concurred in it entirely.

I then wrote a note to Dr. J. Baxter Upham, requesting him to see the patient, as he had had so large an experience in such cases. Dr. Upham did so, and pronounced the case one of cerebro-spinal meningitis, precisely such as he had treated at Newbern, and, moreover, a very bad form of that disorder.

Dr. Upham noticed the same tenderness at nape of the neck which he had observed in the cases at Newbern. By his advice cloths wrung out of hot water were applied to the back of the head and spine, and these, frequently renewed, were continued until a short time before his death, which took place at 5½, P. M., March 27th, his whole illness having lasted about thirty hours.

I am sorry to say that I was unable to obtain a *post-mortem* examination.

CEREBRO-SPINAL MENINGITIS.

[Communicated for the Boston Medical and Surgical Journal.]

MESSRS. EDITORS,—I send you a brief article for the benefit of your readers—or rather, hoping it may *prompt* one, on the subject of the so-called “spotted fever,” or, as some term it, “cerebro-spinal meningitis.” The question with me is, is the disease, so called, and now prevailing in some localities, identical with the “spotted fever” of 1812–13, and onward? This was also called, I think by Dr. Gallup, of Vermont, “typhus syncopalis.” My own recollections of that fever (I was then 19 years old, the son of a physician in large practice, and though not then a medical student, I saw much of the fever) are, that it wore a very different aspect from the cases now described as “spotted fever.” One incident, occurring to myself at that time, I should beg pardon for relating. I spent the winter of