sphere charged with a higher than ordinary proportion of oxygen.

In cases presenting the hope of recovery, as expressed by a return of warmth and fulness to the skin, of yellow colouring matter in the motions, of urine from the bladder, I should treat the patient according to the ordinary rational practice in the convalescence from fever, closely attending to every organ in its relations of structure and function, and preventing, by all legitimate means, any undue strain or demand for action in any particular part. In such cases, I should enjoin great watchfulness and moderation in diet, administering, as medicine, little more than the ammoniated salines.

October 10, 1848.

REPORT OF A CASE OF SUBACUTE INFLAMMATION OF THE PROSTATE GLAND TREATED BY NITRATE OF SILVER.

By NATHANIEL WARD, Esq., F.R.C.S., London.

A GENTLEMAN, aged twenty-seven, consulted me in the beginning of February. He had suffered, since Christmas, with severe pain along the urethra, referred, however, principally to the glans penis, and a constant desire to pass urine, which, with the utmost effort, he could not retain longer than half an hour together. To these symptoms were shortly added seminal emissions three or four times a week. Beyond slight debility the constitution had not suffered.

I passed a catheter into the bladder, and the instrument, on reaching the prostatic portion of the urethra, gave rise to excruciating pain. The urine withdrawn had a specific gravity of 10.20, was slightly acid, contained a large quantity of puriform mucus, and on microscopic examination exhibited scales of tessellated epithelium, and small flattened calculi analogous to those contained in the substance of the prostate. The smallest calculus was about twice the size of a pus globule, and had a concentric arrangement of its laminae. I prescribed a generous diet, recumbent position, suspensory bandage to the testes, with cold affusion every morning to the perineum, and to take a little ammonia and iron three times daily. On the third day I passed a sound into the bladder, and kept it there three or four minutes, with great relief to the pain and irritability at the prostatic portion of the urethra, so that on the fifth day I was enabled to apply the nitrate of silver by means of Lallemand's instrument. One application was sufficient. The severe symptoms gradually subsided, and at the end of a fortnight from the time I first saw him, he could retain his urine for six hours, and it was perfectly clear, and to all appearance natural. He has remained well ever since.

Remarks.—The details of the above case leave no doubt that the prostate was the organ originally affected, and chiefly that part in immediate connexion with the ducts. That this inflammation was not of an acute character was evidenced by the absence of perineal pain, of tenesmus when at stool, and of tenderness on pressure. The prostatic calculi in the urine mainly assisted the diagnosis, which might otherwise have interpreted the case as one of disease only of the vas deferens. The latter structure, however, in this instance, was but secondarily affected, and with it, in all probability, the mucous membrane of the bladder.

Finsbury-place South, 1848.

REPORTS OF REMARKABLE CASES OF POISONING BY ARSENIC, IN WHICH THE SYMPTOMS WERE UNUSUALLY DELAYED.

By L. OWEN FOX, Esq., M.R.C.S., &c., Stockbridge, Hants.

CHARLES T—, aged twenty-one years, a strong, healthy man, a miller, took by mistake a teaspoonful of arsenious acid, thinking it to be flour, he having been in the habit of taking the latter every morning, on the recommendation of an old woman, for an eruption on the scalp.

From the evidence given before the coroner, it appeared that white arsenic had been used for rats on the previous day, and about a teaspoonful, more or less, which was left, was put into a tea-cup, and placed on a shelf from which deceased used to take a cup to mix his flour in every morning. The servant-maid would sometimes place the flour ready on the shelf, for the deceased, that he might not forget to take it; and on this occasion she had unfortunately, in a hurry, placed the cup containing the arsenic on the shelf, intending, on the first leisure moment, to remove it to a safer place.

George Collins deposed to having seen deceased in perfect health, at six o'clock A.M., February 25, 1847:—"Deceased was at the pump, stirring what Collins considered to be flour, in a tea-cup. The cup was half full, and after he had said it did not mix very well, drank the contents of the cup. After being at work about twenty minutes or half an hour, deceased said, 'that flour seemed rather rough; I'll go and ask the maid what it was.' Deceased returned and said, 'it was arsenic master brought out of the mill.' He did not seem at all alarmed, but was advised to drink plenty of salt and water; he did so, but was not sick, and thought there was nothing the matter. He was persuaded to go to the doctor immediately."

Deceased arrived at my house shortly after eight A.M., after walking slowly a distance of two miles. He very coolly said he wished for an emetic, and did not say, until asked, what he wanted it for. His reply was, "They tell me I have taken poison, but there is nothing the matter; I am not ill, but I suppose I had better take an emetic."

Deceased complained of no sickness, faintness, burning or pricking sensation at the throat, nor of any symptom that would lead one to suppose that poison had been taken, and two hours previously too! I gave him an emetic of sulphate of zinc, which acted in a few minutes, and brought up some white powder tinged with bile. I then gave him large draughts of milk and lime-water, which were quickly ejected. After a short interval the stomach became quiet, and deceased expressed himself as quite well, and said he should return to his work, but he consented, on my advice, to remain at hand for a few hours, and, in the mean time, to drink plentifully of lime-water. I desired him to send to me on feeling himself at all ill, or if sickness should come on.

I felt very sceptical as to his having taken arsenic; and unfortunately, I was unable to decide the point, for, during my absence for a moment, my surgery boy had thrown away the contents of the basin which deceased had vomited. Hearing nothing of deceased for three hours after this time, I felt satisfied that arsenic had not been taken, and believed the man had gone home.

At twelve o'clock I was sent for, as diarrhoea had suddenly come on. He had vomited two or three times yellowish-coloured fluid. On my arrival, I found my patient sitting by the fire in a drowsy state, but easily aroused; countenance sunken and livid; pulse rapid, and extremely feeble; surface of the body cold, and watery stools of a greenish hue passing involuntarily. He answered questions rationally, and complained of no pain, no tenderness of the abdomen, no tenesmus, or any of the usual irritative symptoms of poisoning by arsenic. I ordered him instantly to a warm bed, and to have hot water to the feet, &c., and a little brandy-and-water. He seemed to rally for a short time, and desired to get out of bed. He was allowed to do so, contrary to my directions, and then complained of dimness of sight, lay down on the bed, and in a few minutes expired.

The coroner did not think himself warranted in ordering a post-mortem examination, as there were no suspicious circumstances in the case; I was therefore unable to obtain an inspection, post-mortem. The remarkable features in the case are: the length of time before any symptom of poisoning occurred, and the total absence of the usual symptoms of poisoning by arsenic. May not the fact of the arsenic being mixed with flour, in some degree account for the former circumstance?

This case strongly resembles one related by M. Laborde, mentioned by Dr. Todd Thompson, and related also by Dr. Taylor, in his excellent work on "Medical Jurisprudence."

"A young woman swallowed a considerable number of small fragments of arsenious acid. As she was seen swallowing the poison, a physician was sent for immediately; he forced her to drink, which caused vomiting without much uneasiness. In two hours afterwards, her countenance expressed much anxiety, but she was tranquil. She gradually became drowsy, then remained calm for four or five hours; and finally, on trying to sit up, complained of pain in her stomach, and expired without a groan."

Broughton, Stockbridge, Hants, 1848.

REPORT II.

By WALTER CLEGG, Esq., Surgeon, Boston, Lincolnshire.

I BELIEVE that no medical record contains the report of a case of poisoning, by arsenic, more extraordinary than that which follows:—

On Sunday, August 27th, at five o'clock in the afternoon, a woman requested me to visit her niece, who had, about noon, taken a tea-spoonful of white arsenic. I attended, and found

a heavy, stupid-looking girl sitting in her chair, more asleep than awake. On rousing her, she reeled about the room as if intoxicated; indeed, I suspected poisoning by some narcotic. But she acknowledged having swallowed "white mercury," and a paper packet was brought to me, from which she had taken the poison, containing about ten grains of a white powder. By means of my pocket-lens, I immediately recognised this powder to be arsenious acid. She vomited once after dinner, but there were no further symptoms until half an hour before she died—that is, at noon, the following day.

She had no sickness, no pain, no acrid eructations, no burning taste in the mouth; her face was very pale, and she was faint and giddy. The sulphate of zinc, with mucilaginous drinks, soon produced profuse vomiting, and this was kept up for half an hour. Then another medical man arrived with a jar of the hydrated peroxide of iron; and having some pressing professional engagements, I left her with my friend, who administered large doses of the antidote.

At nine o'clock at night we visited her together. She had experienced no pain; no unpleasant symptom whatever; she was disposed to sleep quietly. At ten o'clock the next morning the patient's aunt came to say that her niece was quite well, "might she go a gleaning?" Up to half-past eleven o'clock she continued more than ordinarily cheerful, and was busied in preparing the family dinner. At half-past eleven o'clock she suddenly complained of an excruciating pain in the body, with excessive prostration of strength. She went to her bed-room to lie down, and at twelve o'clock was found dead, kneeling by the bed-side. Thus she died in about eighteen hours after taking the poison, and within half an hour after the first decided symptom of poisoning was manifested.

Autopsy, forty-eight hours afterwards.—The stomach contained half a pint of a thin, dirty green fluid; the mucous coat was much corrugated, having a fungoid appearance, very soft, and so fragile that a touch of the finger tore it away. Three or four large reddish-brown patches were observed, and these extended into the intestine considerably beyond the duodenum. The peritoneal coats of the stomach and bowels were not inflamed; the lungs and the heart were healthy; the head was not inspected.

It only remains for me to add that the matter vomited, and the fluids in the stomach and intestines, contained abundant evidence of the presence of arsenic. Minute fragments of a white powder were seen adhering to the mucous coat of the stomach, and these, by the ordinary tests, were proved most satisfactorily to be arsenious acid.

Explanation (?)—The lower classes in Lincolnshire are very much addicted to the use of opium and laudanum. I have known women with three shillings a week from the parish spend half-a-crown in the purchase of opium. I have reason to believe that this girl was an opium-eater. Did one poison mask the evidences of the other? Did the opium suppress the horrible agonies of arsenical poisoning, thus modifying the symptoms, whilst it had no power to interrupt the effects of the deadly drug?

September, 1848.

ON AN ELECTRICAL PHENOMENON OBSERVED IN CHOLERA.

By J. C. ATKINSON, Esq., M.R.C.S., &c., Westminster.

I AM desirous at the present moment of directing the attention of your numerous scientific readers to a very interesting phenomenon, more or less present in the collapse stage of cholera, which seems to have hitherto escaped the observation of medical men—viz., animal electricity, or phosphorescence of the human body. My attention was first attracted to the subject during the former visitation of that fearful disease in the metropolis. It was indeed singular to notice the quantity of electric fluid which continually discharged itself on the approach of any conducting body to the surface of the skin of a patient labouring under the collapse stage, more particularly if the patient had been previously enveloped in blankets; *streams of electricity*, many averaging one inch and a half in length, could be readily educted by the knuckle of the hand when directed to any part of the body, and these appeared, in colour, effect, crackling noise, and luminous character, similar to that which we are all accustomed to observe when touching a charged Leyden jar. I may remark the coincidence, that simultaneously with the heat of the body passing off, the electricity was evolved; and I am therefore led to ask the question—Are not heat, electric and galvanic fluids, *one* and the same thing? Does not the fact of the

passing off of both imponderable substances at one and the same time strengthen this conclusion?

Again: are not the whole of what we call *vital* phenomena produced by certain modifications of the electric-galvanic-magnetic matter and motions? and do we not find that these *vital* phenomena are continuously affected by the relative state of the surrounding electric medium? To what can we attribute the present fluctuating condition of the barometer, if not to it?

We know what wonderful *decomposing* action galvanism had on alkalis, under the hands of the illustrious Humphrey Davy; but we do not know, nor have we any conception in the present state of knowledge, of the *decomposing* action of electric matter of the atmospheric air, in various conditions, on the fluids generally of the animal body. Chemistry has failed in pointing out any ponderable material as the exciting cause of epidemic diseases.

In the treatment of Cholera, all are agreed that *non-conducting* substances on the surface of the skin aid essentially the cure; and during the disturbed state of the atmosphere, for the purpose of retaining the electricity continually eliminating in the system, we are told to wear woollen bandages, flannel, and gutta percha soles, so as to insulate as much as possible the body, to prevent the heat—the electric fluid—from passing off.

Westminster, October, 1848.

A NEW METHOD SUGGESTED FOR THE RESTORATION OF ANIMAL HEAT IN THE COLLAPSE STAGE OF CHOLERA.

By MR. JAMES TURNER, Veterinary Surgeon, London.

I AM impressed with the belief that an agent I am about to propose in the treatment of spasmodic cholera, is capable of imparting instantaneously, not only the requisite amount of caloric, but also an additional *vital principle* in association with it. Instead of enveloping the body of the patient in flannel I would have a sheep slaughtered close to his residence, and the whole skin of the animal by its flesh side, while reeking, applied to the bare skin over the entire trunk and lower extremities of the cholera patient.

I may be permitted here to state, that upon horses this is the only known therapeutic agent which we possess as a sudorific, but so potent is it in operation, that the result may be compared to a race-horse's sweat in body-clothes preparing for a sweepstakes:—first, it imparts its own animal heat; secondly, by its weight and close adaptation to all the convexities and concavities it adheres most tenaciously, aided in this particular by the retention of some contractile quality; thirdly, it is a counter-irritant, and will occasionally vesicate, or loosen the hair.

As a *renovator* in those cases of prostration of the vital powers where the dark colour and thick consistence of the blood indicate the abstraction of its vitality, the curative power of this remedy has been times and oft thrust upon my notice, when applied to the exhausted or overdone hunter. Horses which have been left for dead in the field from the severity of the chase, which had lost the power of standing and of locomotion, and were obliged to be dragged on a gate to the nearest stable, when one or more fresh-flayed skins have been applied throughout the spinal region, from the poll to the tail, by the following morning have been able to walk round their loose box without support.

In theorizing upon the *modus operandi* of this agent, I claim for it a much higher power than that of conveying a high temperature and maintaining it for a lengthened period.

Transfusion of blood into the veins has been wisely proposed for Asiatic cholera; my suggestion is an approach to it, without having to encounter the prejudices of so formidable a proceeding. The pores of the human skin, by the transmission of heat and moisture, will open and imbibe the *halitus*, or serous vapour evolved from the recently slaughtered skin, and this will be retained owing to the close approximation or adhesion which will be found to exist between the two skins.

Cases of *suspended animation* from drowning &c. should be similarly treated.

Regent-street, October 31, 1848.

VISITING JUSTICES OF LUNATIC ASYLUMS.—The following gentlemen were appointed, at the Michaelmas General Quarter Sessions for Gloucestershire, visiting medical officers for the various lunatic asylums in that county:—William Philpot Brookes, M.D., Cheltenham; Gilbert Lyon, M.D., Clifton; and Charles Cornwall, Esq., Fairford.