where she lay for some time confused and almost insensible. The next morning the symptoms were mitigated, but headach remained, and inability to raise the eyelid, and from that period to the present she had suffered more or less intensely from the symptoms of which she now complained, namely, hemicrania, ptosis, facial tic, and bilious vomitings.

I need not enter minutely into the plan of treatment adopted in this case. The bowels being constipated, gentle purgatives were ordered, and tonics, consisting of the oxide of zinc, and compound infusion of cascarrilla. She was sent to the coast, and, in conjunction with these internal remedies, employed tepid sea-bathing. In a month or six weeks (perhaps less, for I have no note in my case-book of her return) she called to inform me of her recovery, and from that time to the present she has experienced no relapse.

One circumstance she related with marked surprise, that when her general health had been in some degree restored, her eyelid gave a "*sudden pop*," and instantly regained its natural condition. This, however, merely adds additional weight to the diagnosis.

Now, suppose this patient had been blistered, leeches, cupped, placed under gentle ptialism, and the "*dessein antiphlogistique*" in other respects, had been fulfilled,—which was the line, perhaps, the dilated eye, drooping lid, and intense pain in the head seemed, on the first blush, to indicate—what would have been the probable result? I merely ask the question to impress the necessity of great carefulness in all our examinations of cases where many of the manifestations of structural lesion are simulated by hysteria.

Parliament-street, Whitehall,
August 15, 1844.

ON THE EFFICACY OF LARGE DOSES OF CALOMEL IN TYPHUS.

By J. BURGESS, Esq., M.R.C.S.

If you think proper to insert the inclosed communication, which appeared in a provincial journal in 1842, it will show that the use of *calomel* in *typhus*, proclaimed as a new opinion in a contemporary periodical, which came accidentally under my notice, has been anticipated by me, as therein recorded, and practised in the manner described, with the most unfailing success more than twenty years since.

CALOMEL.

The popular character of calomel as a medicine may be some apology for trespassing upon your space with the following observations, since medicines of common and general use, like *diet*, *clothing*, *nursing*, and *exercise*, appeal to the welfare of all classes, and claim a popular discussion.

An interesting article in the *Times*, on "The Climate of the Western Coast of Africa," which appeared on the 12th ult., induced the following remarks:—

Calomel, although a specific remedy in many diseases, is capricious and uncertain in its action, which is frequently the result of an empiricism in its use, even by those of whom better things ought to be expected.

One of the most familiar circumstances attending its use, when continued in small doses, is *salivation*, and swelling of the soft parts of the palate, mouth, and gums, which occur more or less certainly and speedily in different constitutions.

This is so common a tendency that it is frequently considered by the practitioner inseparable from its remedial powers, a conclusion which leads to much error in the treatment of diseases.

In those cases in which this test of a curative mercurial influence is wanted to establish its permanency and safety, the object is to know how to arrive at it, in a degree sufficiently small and mild, and which is one of the desiderata of medical practice.

There is a wide range of diseases in the treatment of which its remedial powers depend in no degree whatever on these circumstances, but, on the contrary, are impeded and frustrated by them, and yet, in its use, the

practitioner has difficulty to divest himself of the prejudice of a necessity for its affecting the mouth and gums.

It is necessary to continue its influence on the vascular and absorbent systems for a lengthened period to develop some of its powers; and it may be difficult under some circumstances and constitutions to avoid this dilemma; but if *mercurial salivation* was to be considered in the light of a *false practice*, and its avoidance a test of a successful one, supposing the cure to be obtained in the one instance without mischief or injury to the constitution, so likely to result from salivation, the triumph of *calomel* in the treatment of disease would become established, and this valuable remedy would be henceforth relieved from the *ban* under which it is placed.

In those cases in which small doses of calomel are required to be administered most often there exist counteracting circumstances to prevent or mitigate its irritating tendencies.

In children, in whom small doses of calomel are most often indicated, a condition of the intestinal canal presents, to remove which no other remedy than calomel will prevail, it being loaded with a slimy and mucous secretion, protecting its surfaces from the agency of remedies, which, in no other cases and without such protection, would be *irritating* and *preternaturally* active.

It is the *peculiar remedy* of infants and children; but the greatest triumph of calomel, even in the cure of infantile diseases, is in the administration of large doses, which act upon the overloaded absorbent system, invigorating it, and restoring the patient to health.

Its merit as a remedial agent does not consist in its *irritant* qualities, but in its *sedative* ones; and the first invariably developed by a timid and fearful exhibition of it in *small doses*, whilst its *sedative* and more valuable qualities result from *large doses*.

Thirty, or sixty grains of calomel, administered in *typhus*, act like a charm upon the unconscious and comatose patient, and produce what every other remedy fails to do, a profound and natural sleep, from which he awakens to consciousness and comparative comfort, with a soft and relaxed skin, a free and tranquil pulse, and a tendency to general perspiration; the bowels become washed with secretions, and *saline* purgatives being resorted to, after the benefit of sleep has been obtained, make them *patent*; and little more is left to remove the most formidable attacks of this epidemic, but to repeat the remedy and aid its influence by cold affusions over the surface of the body.

The agency of calomel in *yellow fever*, and the other formidable endemics of *tropical climates*, which *cateris paribus*, are within the same denomination and class of morbid actions, only influenced by temperature, is of a similar character, and totally independent of its *irritant* agency, or of any effect it produces upon the mouth and gums, which is a vulgar and coarse test of its influence.

The most successful *sedatives* we possess, next to *blood-letting* to *syncope*, are calomel, in *large doses*; laudanum, in *large doses* (particularly when administered after *depletion* and *blood-letting*), oxymuriate of mercury, combined with tincture of foxglove, in *small doses*; and these, next to the lancet, are the most successful means to combat *acute diseases*, and are divested of the objections to *blood-letting*, of leaving a permanent and organic debility, forbidding in many instances its use; or as an evil scarcely less than the disease, and which objection also exists against *tartar emetic*, which remotely debilitates the *nervous* and absorbent systems, and impairs the *vital powers*. I am, Sir, your obedient servant,

JOSHUA BURGESS.

Leicester, Dec. 29, 1842.

ALKALIES IN THE TREATMENT OF DIABETES.

To the Editor of THE LANCET.

SIR,—The enclosed printed remarks show that the alkaline treatment of diabetes has long been anticipated. MM. Miale and Contour, as far as I am concerned, are quite welcome to all the credit that may be due to them, and were I not too well aware, from some little experience, that soda alone, if persisted in, would not even—