9. *Tubulo-intestinal Fistula*.—M. G. E. MASLIEURAT LAGÈMARN in the dissection of a woman of about forty or forty-five years of age, in the dissecting rooms of the *École-pratique*, met with the following very singular pathological condition. There was a perforation of the large intestine at its sigmoid flexure, at which point the intestine adhered to the fallopian tube, and in this last there was also a corresponding perforation, through which fecal matters passed into the cavity of the uterus, and were evacuated through the vagina. No account of the previous history of the patient could be obtained. The dissection is given in detail in the *Archives Générales* for December, 1836.

10. *Atrophy of the Parietes of the Uterus*.—M. RIPAUT reports a case in which he performed the cesarean section, in which the parietes of the uterus were not thicker than the blade of a knife.—*Archives Générales* for November, 1836.

MATERIA MEDICA AND GENERAL THERAPEUTICS.

11. *On the employment of Opium in the Exanthemata*. By GEORGE G. SIGMOND M. D.—(Extracted from a course of lectures on Materia Medica and Therapeutics, delivered at the Windmill street School of Medicine.) Opium, in the exanthemata, or those diseases which are attended with specific eruptions, which occur once only during life, is occasionally to be administered; for instance in the confluent small-pox, when salivation, the necessary evacuation, occurs, it is most advantageous, and in stages of debility; but, on the other hand, it should most scrupulously be avoided in the diarrhoea which succeeds measles, the proper cure of which is bleeding; and the same caution is to be evinced in the delirium that attends scarlet fever, and which sometimes precedes it. This delirium, unlike the delirium of fevers, is not to be considered an unfavourable symptom, nor should you allow it to weigh upon the minds of the friends of the patient; it must not be tampered with, and bleeding and blistering are, above all, prejudicial. In active hemorrhage, or fluxes of blood, whilst any fever is present, opium is not to be given; but in passive hemorrhages it is serviceable; in uterine hemorrhages it has the recommendation and authority of Burns, of Gooch, and of Hamilton, and very large quantities may be given at a dose. Mr. Stewart recommends and gives in his practice, in the *Medico-Chirurgical Transactions*, not less than 80 drops at a dose; it certainly is of the greatest value when much restlessness and irritation are present, you must, however, be aware of the fact, that not unfrequently, as a secondary effect, it produces retention of urine; you must also remember, that according to the urgency of the symptoms must be the largeness of the dose, and that once having given a certain quantity you must not diminish it, and, above all, you must not suddenly omit it altogether; these are practical points of great importance, and are to be gathered from the works of the authors I have just named, and from daily experience.—*Lancet*.

12. *On the employment of Opium in Dysentery*. By G. G. SIGMOND, M. D.—In dysentery, as occurring in Great Britain, opium is most valuable, and here again I must refer you to Sydenham; and also in warmer climates it has met with its supporters—Lind, Wedelios, Bontins. At the same time there are not wanting men of ample experience who do not place any faith in its efficacy in this disease; amongst whom I may mention Pringle, Cleghorn, Blanc, and Baker. A few gentle purges of castor oil, followed by laudanum, is the most general treatment pursued in this country; but care must be taken to give sufficient doses at proper intervals, and not, as Dr. Crumpe has observed, is too often the case, "to give an anodyne at night, which eases and composes the patient, and in the morning, when its efficacy is worn out, and the tortures of the complaint again return, in place of repeating what before proved effectual, to have recourse to some irritating purgative." Where the intestines have become ulcerated, opium may freely be given as a palliative. In the third volume of the *Medical and Physical Journal*, for 1800, appeared a letter addressed to John Pearson, from Mr. Hope, in which he speaks of opium combined with nitrous acid as a specific, for dysentery. He prescribes, with unvarying success, acid nit. ʒij; opii, gr. ij; aquæ puræ, ʒij;

of which he recommends a teaspoonful two or three times a day, with any liquid.—*Ibid.*

13. *On Opium in Tetanus, and some other Spasmodic Diseases.* By G. G. SIGMONN, M. D.—In tetanus, opium has been administered in enormous doses, and it is generally acknowledged that more benefit has been the result of this than of any other remedy. In this disease opium has been given to the amount of a scruple every hour, and a drachm as a night dose; and there has been found in the stomach, upon examination after death, sufficient to have killed the patient if he had recovered from the disease. In an early volume of the *Medical and Physical Journal* Mr. Cole relates a successfully treated case of tetanus, in which he gave thirty grains of pure opium, which is equivalent to 600 drops of pure laudanum, in twenty-four hours. Mursinne, of Berlin, has treated this subject very well; he prefers giving the drug in small doses, placing his patient in a warm bath, which evidently increases the activity of the opiate, which he prefers employing in the liquid form, at repeated intervals, giving larger doses gradually. Mr. Jenkinson, of the *Manchester Infirmary*, Mr. Boutflower, of Salford, and Mr. Ward, Surgeon to the *Manchester Infirmary*, wrote very ably some time since on opiate frictions in tetanus; with this remedy they had been eminently successful. Mr. Ward's observations on the effects of opium, applied internally, are remarkably practical and judicious. In the early volumes of the periodical to which I have alluded, you will find a series of very useful dissertations by Mr. Ward, on the *modus operandi* of opium; they occupied a great deal of attention at the time they were published: the subject is, as I have elsewhere observed, very interesting, but very difficult of solution. Dupuytren has taught us to give, with decidedly good effect, opium in that species of delirium traumaticum which is so closely allied to delirium tremens, and which often follows very violent injuries. If the opium be suddenly discontinued, a relapse of the delirium, accompanied with most extraordinary depression, is the result. I must refer you to a very interesting case, under the judicious management of Mr. Cæsar Hawkins, at *St. George's Hospital*, where, from fracture of the neck of the thigh-bone, delirium traumaticum occurred; it is narrated in the *Medico-Chirurgical Review* for February, 1823, and is well worthy your attentive perusal. In the greater number of the diseases which are classed under the head of spasmi, opium is very serviceable, but the effects are transitory, seldom terminating in cure; it is, therefore, employed only as a palliative. Thus, in chorea it affords temporary relief, but as more active remedial agents are known to us it is rarely employed. Opiate frictions in spasmodic diseases are frequently of most decided use; a drachm of finely powdered opium with a pound of axunge, or half an ounce of tincture of opium with the yolk of an egg, or with two drachms of oil, or with soap liniment, will be found most serviceable.

In Doncan's *Annals of Medicine* will be found a translation of Dr. Chiarige's practice in tetanus, in hydrophobia, in epilepsy, and likewise in paroxysms of the most furious mania, and in diabetes. Many cases are recorded of similar success by many British practitioners in various of these diseases. Opium, in true spasmodic colic, is a judicious remedy. Where this disease, however, is combined with inflammation, it is hurtful. A few drops of laudanum (from fifteen to thirty) in castor oil, in the earlier stage, will act as a charm; and also in that sudden and excruciating colic which results from the taking of cold drinks, or ice, whilst the system is heated; and in this case a large dose is absolutely necessary.—*Ibid.*

14. *On Opium in Epilepsy.* By G. G. SIGMONN, M. D.—In epilepsy, where no plethora exists, and where pain occurs, opium may prove serviceable; still we have not many cases on record which have been thus cured. Dr. Darwin tells us, that in two cases in which it occurred during sleep, a grain of the drug given at bed-time for some months removed the disease. De Haen relates, also, a case in which epilepsy, occurring during the night in a boy of six years of age, was cured by commencing with small doses, and gradually increasing it. Duchesne called opium a specific, but it has not obtained that character generally; indeed, it has been rather the subject of theoretical reasoning in this complaint than of practical experiment. Its external application has been of service. Portal attended a young lady who was daily attacked by very severe epileptic fits; they