bolic oil, having been previously syringed with solution of permanganate of potash.

Sept. 6th. — Patient doing well; appetite rapidly increasing; he sleeps well; the discharge is decreasing.

20th. — Wound filling up rapidly. The weights were discontinued to-day, and the patient was told he might move his leg.

30th. — Patient is very cheerful, has no pain, and eats and sleeps well. Wound almost healed.

Oct. 18th. — Has been up for three days. He can walk with assistance, but is unable to bear the whole weight on the right leg.

24th. — Discharged to-day. He was seen two weeks after this, and was doing well, and able to bear considerable weight on the right leg.

MIDDLESEX HOSPITAL.

COMPOUND COMMINUTED FRACTURE OF THE LEG; FOUR ATTACKS OF ERYSIPELAS; PLEURISY; TREATMENT BY ANTISEPTICS; GOOD RESULT.

(Under the care of Mr. HULKE.)

T. D—, aged thirty-six, a stout, heavy baker, admitted July 11th, 1871, with a compound fracture of the left leg, caused by slipping off the step of an omnibus. An oblique wound of the soft parts, at the inner side of the leg, about two inches long, communicated with the fracture, which was a hand's-breadth above the ankle. The wound was washed with a watery solution of carbolic acid (1 to 40), and closed with a pledget of lint soaked in carbolised oil, and covered with a layer of gutta-percha and plaster. The limb was placed on a Bell's back splint, with side splints, and ice continually applied. On admission the pulse was 72, temperature 97.6° F. On Feb. 13th the temperature was 102.6°. In consequence of hæmorrhage the dressings had to be changed. On the 14th the pulse was 132, temperature 103.4°; leg slightly swollen. On the 15th the temperature was 105°, the pulse 124, full and hard. Some cough and oozing of blood from the wound still continued. Some ecchymosis observable, extending up the leg to the upper third. On the 18th the leg was considerably swollen and red, with a bulla on the external malleolus. His urine was high-coloured, and contained some bile, and yellowness of conjunctiva was observable. Pulse 104, temperature 103°. On the 19th the erysipelas had increased. A lotion of sulphate of iron (ten grains to an ounce) was ordered to be applied to the limb. The next day the erysipelas had increased, and there was much bronchitis. Incisions were made in the limb, and a lotion of chloralum was applied. On the 21st a mercurial purgative was given, and the incisions were washed out with a solution of sulphurous acid (1 to 8). From this date he steadily improved till July 31st, when the pulse was 100, and the temperature 98.5°. A splinter of bone had been removed from the leg on the 28th, and the erysipelas had quite subsided.

On August 5th he had some return of his troubles, and two days later his temperature rose to 102°. He had sore-throat, some cellulitis on the inside of the thigh, and a slough formed on his heel. On the 23rd this condition of things had subsided. The splint was readjusted, the leg looked quiet, the incisions still discharged, no union had taken place. The wound was still syringed with the sulphurous acid lotion, and dressed with unguentum cretæ.

On Sept. 7th the erysipelas returned for the third time; the leg was very red and swollen, the redness extending along the course of the lymphatics about the knee to the upper part of the thigh. He was ordered a dose of calomel and a mixture containing perchloride of iron, and the leg was dressed with sulphate-of-zinc lotion. This continued till the 13th, when his temperature rose to 104°; and on the following day he was seized with pleurisy of the left side. The zinc lotion was continued till the 25th, when all redness had disappeared, but there still remained much brawny hardness and swelling of the leg and thigh.

He continued to improve till Oct. 23rd, at which date the sinuses and incisions had healed except opposite the fracture, where there was a sequestrum. A starch bandage was applied, the pressure of which caused rapid diminution in the size of the limb, so that on the 27th it had to be "taken in."

He went on well till November 25th, when, the wound opposite the fracture not having healed, it was dilated with a laminaria tent, and a sequestrum was removed. He now went on well with the exception of a fourth slighter attack of erysipelas, which was treated in the same manner as the former one, and with like results.

On December 21st he was discharged convalescent, with a useful limb.

We are much indebted to Mr. Barber for the great assistance afforded us in obtaining the notes of the above case.

SEAMEN'S HOSPITAL, GREENWICH.

LEUKÆMIA LYMPHATICA.

(Under the care of Dr. STEPHEN H. WARD.)

For the notes of the following case we are indebted to Mr. Adam Young, house-physician.

L. L—, aged twenty-four, was admitted into hospital March 21st. He gave the following history:—Four months ago he noticed some enlarged glands in the left axilla; about a week afterwards those of the right became enlarged; then in about a week or a fortnight the glands in the neck and about the jaw increased in size. There was no pain in them at first; when he raised his arms at work the glands in the axilla were painful. He attributed the enlargement of these glands to his being overworked when at Callao; at this time he was badly and scantily fed. Five weeks ago he went into the Cork Hospital; at this time his breathing was oppressed and hurried, and he was also troubled with a frequent tickling cough. He had some difficulty in swallowing his food, and complained of a tightness in his throat, "as if the pipes were constricted," he said. Till this present illness he has always had good health.

State on admission.—The patient is generally emaciated, extremely weak, and anæmic. The muscles of the legs are much wasted. The glands in the neck and about the jaw are immensely enlarged, as also those in the axillæ. His head has the appearance of being unusually small, and looks as if it were resting upon an immense base of enlarged glands. There is no enlargement of the inguinal glands. The left eyelid is cedematous, and the whole face pale and puffy. When the patient lies on his back or on the left side, the face becomes quite livid and the breathing greatly oppressed and quickened. Respiration 48 in a minute. He has a frequent harsh cough. There is a fair resonance over all the chest; respiration blowing; some crepitation at the base of both lungs. No night-sweats. Pulse 86, small and weak. Heart's action somewhat increased; no murmur. The abdomen is swollen and pendulous; the prepuce cedematous. The chest walls are cedematous; the superficial veins slightly enlarged and tortuous. The spleen is very little if at all increased in size; rather tender on pressure. Liver slightly enlarged.

On microscopical examination of the blood the white cells are seen to be greatly increased in number, as many as 200 being counted in one field. Urine: sp. gr. 1034, acid; urates and chlorides abundant; no sugar; no albumen.

From the 23rd to the 29th of March the condition of the patient was very little changed. Pulse 120; temperature 104°; breathing less embarrassed.

29th.—Breathing less embarrassed; has had a good night; swallows food with greater ease; pulse 113; temperature 103.4°. Measurement round the head in a line with the chin, 1 ft. 11 in.; measurement with tape passed under the chin and over the vertex, 2 ft. 3½ in. There is not so much cedema about the face.

April 6th.—Patient died this morning apparently from exhaustion; no special change had occurred in his condition since admission.

The treatment consisted of a drachm of the syrup of the iodide of iron three times a day; and good diet with wine.

Autopsy, forty-eight hours after death.—Body much emaciated. The right pleural cavity contained five pints of clear straw-coloured fluid; the intercostal and mammary glands enlarged; there were deposits under the pleura, on the under surface of the ribs, and on the lung. The left pleural cavity contained four pints of straw-coloured fluid; and there were numerous growths of the same character as those on the right side. Several large glands were seen

upon the diaphragm, in front of the pericardium, and others around the great vessels at the base of the heart. The posterior mediastinal and bronchial glands were greatly enlarged. The right lung was compressed against the spinal column; the left lung was healthy. The pericardium contained a considerable quantity of fluid; the heart was small, weighing $9\frac{1}{2}$ oz.; cavities contracted, containing no clot. Mesenteric glands greatly enlarged; stomach healthy; both kidneys congested; liver congested; spleen not increased in size and apparently healthy, weight $6\frac{1}{4}$ oz. The axillary and external mammary glands greatly enlarged; the superficial and deep cervical, and the submaxillary glands were immensely increased in size.

The microscopic examination of a section taken from one of the cervical glands showed numbers of small round cells thickly packed together, and embedded in a fibrous network, the bands of which were in some places broad and very clearly defined.

NORTHERN HOSPITAL, LIVERPOOL.

CASES OF COMPOUND FRACTURE.

(Communicated by W. MACKIE CAMPBELL, M.B., Senior House-Surgeon.)

INTO this hospital, which is chiefly for accidents, a large number of compound fractures are admitted, and under the carbolic acid treatment very good results are obtained. During the last nine months no case has required secondary amputation. The treatment is as follows:—Immediately on admission the wound is thoroughly syringed out with carbolic lotion (1 to 20), or, as Mr. Manifold prefers, with the pure acid; it is then dressed with several layers of lint soaked in carbolic oil (1 to 10), with gutta-percha tissue over all. The limb is then put in splints, and the dressing is left unchanged until the second or third day. The dressing is then renewed, and kept as long as possible unchanged. Should any inflammation appear, poultices are applied, over the oiled lint if possible, and the following mixture is prescribed:—Tincture of perchloride of iron, two drachms; solution of acetate of ammonia, one ounce; water to six ounces: one ounce to be taken three times daily, or oftener. Or irrigation with carbolic lotion (1 to 40) is employed, and persisted in till all signs of inflammation disappear, when the oil is resumed.

The following cases treated in this way during the last three months are worthy of study. Two of them (Cases 1 and 2), compound fractures into joints, are chiefly noticeable for the rapidity of cure; cases which but for carbolic acid would be looked upon with great anxiety. Another (Case 3), a double compound fracture of the left leg, was up in forty-two days, and was discharged cured seven days later.

CASE 1.—W. T.—, aged twenty-nine, a carter, was admitted February 14th, 1872, with a compound fracture into the wrist-joint, with considerable laceration of the soft parts. The wound was syringed with the lotion and dressed with the oil, and the limb placed on a straight splint. Two days after the arm was dressed there was some redness and swelling; the oil was continued, and he was ordered the iron and ammonia mixture. He had no constitutional disturbance, and was up in the second week. He was allowed out on pass on March 16th (thirty days), but is still a patient, as, from loss of covering, there is yet a small superficial wound.

CASE 2.—R. H.—, aged twenty-six, was admitted Feb. 21st, 1872, with compound fracture into the elbow-joint, and fractured humerus in the upper third. The wound was treated in the same way as the last, and the limb put upon an angular splint. He had no bad symptoms, and was made an out-patient on March 2nd (nine days). He has been under my notice up till to-day (March 25th) and is now quite well.

CASE 3.—R. A.—, aged thirty-two, a porter, was admitted January 5th, 1872, with a double compound fracture of both bones of the left leg. In this case irrigation with carbolic lotion (1 to 40) was started on the third day, and the iron and ammonia given. One or two counter openings had to be made, but, notwithstanding, he was able to have his leg starched on February 17th, was out of bed next day, and was discharged cured on the 24th of the same month.

CASE 4.—C. D.—, a girl aged ten, was admitted on January 10th, 1872, with a compound fractured leg. The same treatment was employed; she was up on March 1st, and was discharged cured on the 23rd.

CASE 5.—M. McC.—, aged twenty-seven, a labourer, was admitted January 26th, 1872, with compound comminuted fracture of the left leg. The same treatment was employed as in the last two cases. His leg was starched on March 16th, and he was up the next day.

BIRMINGHAM AND MIDLAND HOSPITAL FOR WOMEN.

CASE OF PUERPERAL ECLAMPSIA AT THE FIFTH MONTH OF PREGNANCY.

(Under the care of Mr. LAWSON TAIT.)

C. J.—, aged twenty-seven, the mother of two children, and to whom two miscarriages had occurred, applied at the hospital on February 12th. She complained of pain in the back occasioned by a fall. The cause of the fall she asserted to be a sudden loss of consciousness, which lasted for some time. She stated that she was within a month of her full time—a circumstance which led to the examination of her urine. This was found to be intensely albuminous, and there can be no doubt that the fall was occasioned really by a uræmic convulsion. She was ordered fifteen-drop doses of the tincture of the muriate of iron and half a drachm of nitric ether in an ounce of water, every four hours, and advised to call in medical assistance at the earliest indication of labour. At three o'clock on the morning of the 15th she was seen by Mr. Tait and was found to be in labour. The pregnancy had not, however, advanced to the sixth month. The urine was found to be only slightly albuminous, but, as a matter of precaution, Mr. Tait kept her under the influence of chloroform for about two hours. Throughout the 16th, 17th, and 18th, the uterine action seemed in abeyance, but on the 19th she was delivered of a putrid fœtus of about the fifth month. Her labour was superintended by Dr. Poncia, who reports that there were no indications of eclampsia, and that she has recovered well.

Remarks.—We have here a very unusual condition of puerperal uræmia occurring early in pregnancy, and in a multipara, causing as usual the death of the fœtus, and discovered by the merest accident. Had the patient gone untreated, there is every reason to believe that a most serious risk of her life would have occurred. Sir James Simpson pointed out the value of the combination of iron and nitric ether, and this case seems to have been one in which its efficacy was well marked.

Medical Societies.

MEDICAL SOCIETY OF LONDON.

MONDAY, APRIL 8TH, 1872.

THOMAS BRYANT, ESQ., F.R.C.S., PRESIDENT.

Mr. SPENCER WATSON showed a patient suffering from Mercurial Tremors. He was a thermometer maker, who had been in the trade for fifteen years, and had resisted the influence of the fumes of mercury for about seven years. Ever since the first attack he had been unable to sign his name from the unsteadiness of his hand. He had never been salivated, but his gums were sore and marked with a blue line, and his teeth were most of them loose, and some very much decayed. He had never had any affection of the bones. The possibility of such cases occurring seems to show that the supervision of unwholesome and deleterious trades is not so complete as it should be.

The PRESIDENT asked whether the workmen adopted any precaution to prevent the poisoning.

Dr. CRISP mentioned the case of a family of five who were all sufferers from mercurial tremors. They were water gilders. He thought ventilation was all-important. His opinion was that mercury was not so deleterious as was commonly believed, and that those who were poisoned by mercury, as in quicksilver mines, did not suffer from the same