from any speculations as to the influence of the vapour of the coal in causing a sudden distension of the previously enlarged thymus in this case. I may, however, in conclusion, observe that the cause assigned by physiologists for the elevation of the brain during expiration, viz. the greater resistance which the blood experiences in its passage through the lungs while in the state of expiration, by which a stagnation is brought about in the right side of the heart, and consequently a retention of blood in the veins, which produces an increase of bulk in so vascular a part, is in favour of the view which I take, that the violence of the symptoms was owing to the compression exercised by the enlarged gland upon the lungs. The great height to which the brain rose, and the alternate subsequent depression, shows how great was the obstruction offered to the venous circulation in them. The heart laboured unduly to overcome not only this obstacle, but the pressure suffered by itself, and the death of the patient is attributable to the embarrassment of the functions of parts so vitally important.

New York, June, 1837.

ART. X. *Case of Cancer of the Stomach, with calcareous concretions in the left lung.* By GEORGE O. SUMNER, M. D., of Hartford, Connecticut.

Moses Perkins, the subject of the following case, was born at Groton, Connecticut, in 1786. He was of a very robust constitution and possessed a degree of resolution amounting to foolhardiness. He exposed himself from his youth to all sorts of hardships; would sleep on the damp ground, and exert his strength on occasions to the utmost, &c. Some of his foolhardy acts the reader will, perhaps, be slow to believe; but I record none but such as I have satisfied myself by particular and minute inquiries to be strictly true. He would eat *living earth-worms*—at one time he ate a gill or more of them at a meal: he would swallow, on wagers, rotten eggs, and eggs with chickens in them, &c.: and, however incredible it may seem, he at one time actually swallowed a *streaked snake alive!* this latter he disgorged by immediately drinking half a pint or a pint of *raw rum!* This act took place ten or fifteen years before his death.* Formerly Perkins fol-

* This is stated on the testimony of respectable eye-witnesses. The opinion of the bystanders seemed to be, however, that Perkins did not intend to swallow the snake: but they state that having caught the reptile, he held it up to his own

lowed the seas for several years. He was a great boxer, and when in his prime, it was frequently said of him "that he had rather fight than eat." In his rows he was often severely beaten and bruised. Some twelve or fourteen years before his death, his left hand was severely injured in blasting rocks: and in the summer of 1828, while engaged in the same employment at Bridgeport, in this state, the same hand was so severely injured by another blast, as to render amputation necessary; which was performed by Dr. Samuel Simons of that place. For the two or three years previous to 1828, his health had been slowly failing; and after the injury of his arm, his failure seemed to be somewhat accelerated. With other complaints, constituting this failure of health, he had been troubled for some time with a defluxion of a nauseous fluid from the posterior nares, and a relaxation uvulæ: these latter complaints he called (and perhaps properly) *catarrh*, and for them he had taken various stimulating snuffs. I do not know that he ever had any syphiloid affection. I might have mentioned before that he had been for years a man of decidedly intemperate habits—in the sense of the term used before the golden days of the temperance reformation.

Perkins first applied to me for medical assistance on the 3d of August, 1829. At that time his skin was very yellow, and there was manifest biliary derangement. He was costive and quite feeble. I prescribed for him as follows: R. aloes; rad. rhei.; hydrarg. chlorid. mit. (calom.) āā gr. i.; sap. cast. gr. ii.; ft. pil. i.; one or two in the twenty-four hours, or sufficient to remove the costiveness and regulate his bowels. After taking a few of these pills he became much better; his countenance improved, and he said he had not felt so well for years.

He continued better for some weeks, but at length began to lose ground, and on the 19th of October I was sent for, and found that he had been attacked with hæmatemesis, with great pain in epigastrio, and vomiting a pretty large quantity of fresh blood; this last had occurred after turns of violent and long-continued coughing. The blood, though fresh, was entirely without froth; and, under all the circumstances, especially in the sequel of the case, I was constrained to think that the blood was discharged from the stomach, and not from the lungs. There was also a spasmodic affection of the abdomi-

widely-distended mouth, and asked his comrades what they would give him if he would swallow it. The poor snake, wriggling to get away, slipped through Perkins's hands and down his throat in an instant. For once, they said, Perkins now seemed intimidated; but, immediately seizing the rum jug, he drank off a large quantity of the liquor, vomiting followed and the snake was ejected.

nal muscles, drawing the portion of muscle on which it operated up into the form of a *ball*, and shifting from one to another portion of muscle.

I gave him tr. opii and tr. ferr. muriat. combined, as anodyne and styptic, and applied an epispastic a little to the right of the epigastrium—afterwards spermaceti and arrow-root jelly as emollient and soothing remedies. I think he had no return of hæmatemesis, but he continued to be the subject of much pain and great debility, and for many days his recovery seemed problematical. For anodyne he took pulv. ipecac. et op. and spts. ether. nitric., with occasional doses of tr. opii. His bowels were costive, and had to be moved every day or two by mild cathartics, as ol. ricini, salts, or mild pills. At length he began slowly to convalesce, and on the 11th of November I discontinued my visits. For a few days previous to my leaving him, I had given him moderately of a mild bitter infusion. He emaciated very much during this sickness.

He was poorly through the succeeding winter, but by dint of good resolution, which never for a moment forsook him, kept about, and attended a grist mill, situated across a cove, and distant a quarter of a mile from his house: he often, however, had to be transported in a boat to and from his house and mill. He got rapidly worse the last of March, 1830, and after he had held out as long as possible, he sent for me.

I found him, March 28, with strength very much prostrated, great emaciation, total loss of appetite, almost total inability to keep food or medicine on the stomach, and costive. There was a small *tumour* situated in the region of the pyloric orifice of the stomach: this tumour was quite sore, and was occasionally the seat of severe pain, the sensation of which he compared to that from being cut with a knife. It struck me at once that here was cancer of the stomach. I applied an epispastic over the tumour, and gave ol. ricini as a cathartic—likewise a pill of ext. hyosciamus gr. ii., calom. gr. $\frac{1}{2}$, two or three of these pills in the twenty-four hours. After a day or two, sickness at stomach nearly subsided, and some little appetite for some kinds of food was experienced. The pain in his stomach also abated, (more indeed than could have been expected as the effect of the medication,) and never returned with any severity: soreness of the tumour continued. After taking six or eight of the hyosciamic pills, they affected his head and sight so much that their use had to be suspended. Laudanum had generally to be given at bed-time, and castor oil to be freely used as a cathartic. His skin, as last fall, was exceedingly yellow, and his strength all gone—could not sit up a moment.

April 21st. I found him very low, and in addition to the previous symptoms, there was a *tumour* at the angle of the jaw on the right side, which was very sore; and there was a watery swelling of the left foot which continued to extend till it reached the trunk. The tumour on the jaw spread down the neck and up the cheek, was very sore, and somewhat painful, and considerably impeded deglutition. Little was done for the unhappy man after this, except to give him an injection every day, and wine to yield him some support. Saturday, April 24, at about 1, A. M., he died.

Dissection the afternoon after death. From peculiar circumstances I was unable to obtain the presence of any medical gentleman.

The abdomen was opened in the usual way, by two divergent incisions carried down from the lower end of the sternum. The *omentum* was mostly adherent to the subjacent parts. The *liver* appeared pretty natural in size and texture, but was uncommonly yellow. The gall bladder contained rather more bile than usual. The pylorus to the extent of one or one and a half inches was much thickened and indurated: to the feel and also to the knife this diseased portion had almost the firmness and hardness of cartilage. Its inner surface was studded with firm and hard prominences, which stood out into its cavity: not much ulceration upon it—some, however, as I took up flakes of matter which were very offensive to the smell. A firm adhesion had taken place betwixt this diseased part of the pylorus and that portion of the left lobe of the liver naturally in contact with it.

The remainder of the stomach was not examined very particularly, but nothing unusual in regard to it was observed.

On opening the thorax there was nothing very striking in the appearance of the external surface of the lungs; there was less floridity, however, and a somewhat more withered aspect to those organs than is common. But the most remarkable appearance here, and doubtless in the whole body, was this: *in the left side of the thorax were portions of an apparently bony substance, imbedded in the lower part of the lung of that side:* these portions being taken out, weighed, undried, seven ounces, avoirdupois. This bony substance was not found exactly in a solid lump, but the portions of it grew near each other, and some of the lumps would have weighed three or four ounces: indeed, I broke the substance up considerably in removing it, and cannot tell how large a piece might have been formed before removal. The left lung was firmly adherent to the diaphragm, and so were some of the concretions: this lung also adhered considerably to the parietes of the chest; so did the right lung, but not as much as the left. There was no osseous matter in the right lung.

On examining the concretions more minutely, I found each lump composed of portions of, apparently, *bony matter*, cemented together by portions of a *white, fatty substance*; the proportions of these constituents varying in different lumps. The bony portions had ~~the~~ cancellated structure of the spongy bones, and nearly the same degree of firmness with the lighter spongy bones.

The *heart* was only examined by feeling with the hand—nothing unusual was in that way discovered. Owing to the lateness of the hour, and reluctance on the part of the deceased's friends, no farther examination of the abdominal viscera, or of any other part, was made.

I may remark that the swelling of the leg nearly subsided after death.

Hartford, Ct., 1837.