friends, together with frictions, with great perseverance for about a year before the rigidity was entirely overcome. He thinks that it was only by these constant efforts on the part of himself and friends for so long a time, that he was enabled to overcome the difficulty, and to gain what muscular power he now possesses, aided, of course, by the medical treatment.

COLD SPRING, N. Y., Aug. 14, 1857.

ART. X.—*Poisoning by Chloroform.* By CHARLES H. SMITH, M.D., Assistant Surgeon, U. S. A. (Communicated by Thos. Lawson, M.D., Surgeon-General, U. S. A.)

PRIVATE HENRY THOMPSON, Company F., Second Cavalry, having a few days previously made an ineffectual attempt to destroy himself, which resulted in a slight wound; on April 13, to carry out his design, swallowed (it appears from his after statement) nearly two ounces of chloroform. I saw him at 10½ P. M., ten or fifteen minutes after he had taken the poison. An empty vial lying near had evidently contained chloroform, of which substance his breath smelled strongly. He had already vomited, but could not be roused from insensibility; breathing stertorous, pulse about 60. After an ineffectual attempt to administer an emetic, the stomach pump was used, and a pint and a half of warm water was twice injected into the stomach, and twice pumped out, loaded with the fumes of chloroform. Spirits of ammonia, ℥ij, were introduced into the stomach before the withdrawal of the tube. After removing the tube vomiting occurred, but the pulse became more feeble, breathing slow; eyes insensible to light. The effect of the cold douche on the head was tried for a few minutes with seeming advantage, the pulse growing stronger, but falling again, the application was discontinued. The surface becoming cold, he was wrapped in five or six blankets, a large stimulating enema administered, and resort had to mustard cataplasms. For the next hour (between 12 P. M. and 1 A. M.) the symptoms were more unfavourable; respiration very slow and feeble; face purple; pulse reduced to about 40, feeble, sometimes scarcely discernible, and intermittent. He evidently grew worse.

At 1 o'clock a gradual improvement commenced, and by 2 A. M. the respiration was easy, pulse 60, feeble but regular; insensibility continues, from which he did not recover till 5 A. M.

April 14. At 8 A. M. pulse 98, burning thirst; tongue coated; fauces red; pain in the stomach, which rejects everything. Says the vial (a two ounce one) was nearly full. Blister to epigastrium. There having been no operation from the bowels, sulph. magnes. ʒj was administered, but vomited. Enema, ol. terebinth. ʒss, and ol. ricini ʒij, in a large quantity of warm

water, brought away large stools. In the evening, milk was rejected by the stomach, likewise tr. opii gtt. xxx.

15th. Did not sleep; incessant short hacking cough; pain in the throat continues; pain is felt in the whole abdomen; tongue dry and thickly coated; stomach retains cold water but rejected ol. ricini $\mathfrak{z}$ j. An enema caused several stools. Warm fomentations applied to abdomen, and at bedtime ext. hyoseyami gr. iij to be given.

16th. Passed restless night; pain in the region of the liver; jaundice appearing; pulse 110; skin hot and dry; expectoration somewhat rusty; no crepitation in lungs, but respiration harsh behind. Mass. hydrarg. gr. x; half dozen cups over region of pain. Tea and toast and milk were relished; several operations from the bowels during the day; jaundice increased by evening. Ext. hyoseyami gr. iij at bedtime.

17th. Pulse 96; skin soft and moist; pain in throat and over liver disappeared, and feels much better; conjunctiva and skin very yellow. Tartrate of soda and potash $\mathfrak{z}$ ss.

18th. Slept well; pulse 70, soft and natural; continues to improve; jaundice decreasing.

After this, in consequence of pain in the right shoulder and region of liver at different times, cups and blisters were applied over the liver, and mercurials administered. By the last of the month he was well, and only waited, to be returned to duty, for the healing of the slight gun-shot wound.

FORT MASON, TEXAS, May 1, 1857.