dull aching in the perinæum, more or less acute, which is sensibly increased by coitus. This often amounts to a sense of acute pain at the moment of ejaculation. The vicinity of the bladder and rectum occasions, in both these organs, the evidences of irritation, without actually extending to them any diseased conditions, and from this circumstance it often happens that tenesmus and dysuria may be taken as indications of morbid activity in the vesiculæ. The symptoms are accompanied by an increased amount of secretion, causing frequent emissions, the latter being usually untended by erection. In the later stages of this form of spermatorrhœa, the emissions appear to be more particularly occasioned by pressure, and it is then that they follow after riding, sitting, and evacuation of the bowels. Indeed, it is to the later stages of this, and the earlier ones of the next disease, that those involuntary emissions, occurring at all times without erection, and which have received the name of *pollutiones diurnæ* must be particularly referred.

The treatment of this disease consists in relieving the system generally, by diminishing as much as possible the inflammatory tendency, and by local counter-irritation. The means most serviceable in local treatment are—the hip-bath, cold or hot, according to circumstances, the duration of the use of which must also be regulated by its effects. Emollient and sedative lavements and suppositories in the rectum are useful when there is much pain. Blisters to the perinæum, occasionally repeated, are also of great service, and in extreme cases I have resorted to issues with success. Beyond general internal treatment, sedatives may be employed, amongst which opium, hyoscyamus, and lupuline are the most serviceable; and when a local or general inflammatory tendency runs high, tartar emetic may be added with great advantage.

Spermatorrhœa Asthenica Vesiculæ is that condition into which the vesiculæ subside after the active symptoms of inflammation have disappeared. This stage is marked by great irritability, lessening only in proportion as the affected parts descend in the scale of activity to complete asthenia. The quantity of the secretion also diminishes, until there remains only a slight but continuous oozing of the vesicular mucus. Intimate as is the functional relation between these organs and the testicles, yet in the disease now mentioned, impotency arises, not from actual deterioration of the fecundating fluid, but from deficiency of vesicular secretion.

The principle injury resulting to the constitution from this disease, is occasioned by the debility and exhaustion succeeding to the continuous efforts requisite for restoring the lost secretion. It may well be imagined that a morbid condition of this kind could not exist long without destroying, not only the functional and structural capability of the parts themselves, but also at the same time undermining the power of the constitution. Fortunately these extreme conditions are rare.

The method of treatment will consist in the restoration of the system by a full diet and tonics, exciting it, if possible, into the inflammatory stages of the former disease, when it will become amenable to the plan already pointed out for the treatment of its active conditions.

Upper Charlotte-street, Fitzroy-square.

ON

A CASE OF POISONING BY STRYCHNIA

AT THE

GENERAL HOSPITAL, JERSEY.

By G. M. JONES, Esq.,

SURGEON TO THE HOSPITAL.

JANE D—, the unfortunate female whose death was accidentally occasioned by taking strychnine pills, (see p. 291 of the last number of THE LANCET,) had been for some time employed as one of the under-nurses at the hospital. She was twenty-two years old, short, fat, and remarkably thick-set, of very ruddy complexion, with short neck and high shoulders, of scrofulous habit and nervous temperament. Lately she complained of occasional dyspnœa, probably the result of a sharp attack of pneumonia she suffered from at the latter end of June last, and which required very energetic treatment to subdue.

On the 24th of August, at half-past eight P.M., I found her

apparently in the enjoyment of perfect health, and assiduously engaged at her duties, for which her kindness of disposition and great attention eminently qualified her. It appears that shortly afterwards she complained of nausea and sickness, which led her to leave the ward, and that on her return she brought four bilious pills, as she stated them to be, and which had been given her by one of the inmates. These she took at half-past nine, immediately before getting into bed. Twenty minutes afterwards, she was heard to moan piteously, and almost simultaneously uttered a loud shriek. The patients (three in number) whom she had the care of were physically unable to obtain assistance: one having lately had the hip-joint excised; the other her knee; and the third laboured under paralysis of the lower extremities. A succession of paroxysms, attended with increased cries, at length attracted the attention of the head-nurse and others, who came to her assistance, and she was at once carried into an empty ward. There the attacks continued with such severity, that the nurse, who first looked upon them as hysterical, became alarmed at their intensity, and sent for me. On entering the room (it must then have been half-past eleven) I was told that, as a longer period had elapsed without a spasm than had hitherto been the case, I might expect to witness one immediately. I waited for this purpose over half an hour, but none occurred, nor did I perceive any tendency whatever to convulsions. The girl's appearance was as usual, also her voice, nor were her features altered, or in the least attenuated. The pulse was more rapid than natural, and the temperature of the body higher. She only complained of past sufferings, not of present pains; and on my repeatedly asking her how she felt, her answer was "better, much better; I think I shall soon be well and able to sleep." She asked for drink, and tea was given, which she swallowed without any apparent effort. While with her, I interrogated the girl who had supplied the pills, and she acknowledged having, a fortnight before, abstracted six from a bottle placed in a corner of the surgery, while waiting for medicine which was then being prepared for the sick; that she took two the same evening without feeling greater discomfort than she had often before experienced after taking medicine; and that, as Jane D— complained of great pain in the stomach and chest, she advised her taking the remaining four, and gave them to her for that purpose. After this candid avowal, I requested her to accompany the person who is in the habit of dispensing the medicine, into the surgery, in order to point out the bottle from which she had taken the pills. She did so; and, on their return, I was told by the employé, that he had tasted one, and that they were composed of "bitter aloes," were in an unlabeled bottle, and had been placed there before he came to the establishment.* After ordering a dose of castor oil, which was at once given, and writing a receipt for an antispasmodic draught, to be taken if the spasms returned, I left the hospital; and it appears that, shortly after my departure, the convulsions returned, and continued, with but slight intermission, until death terminated her sufferings. The unhappy girl retained her faculties to the last, and appears to have had frightful rigidity of the limbs, accompanied by opisthotonos, also a dreadful sensation of choking; and it was, while uttering the words expressive of this feeling, that she expired, at half-past two o'clock—just five hours after taking the pills.

It must ever be a cause of regret to me that I was not again made acquainted with this patient's condition; it was an unpardonable neglect on the part of those who witnessed her extreme sufferings. It is more than probable that no effort of mine could have warded off the effects of this deadly poison; still, had I been present, it might have enabled me to enter into the various symptoms which followed each other, the different changes which may have taken place, together with other points of interest; it would also have enabled me to test on the human body those means which some eight years ago I tried on animals, and which left on my mind, if not a positive conviction, at all events a strong belief, that it is in our power to counteract a poisonous dose of strychnia by that which in itself would prove equally fatal. Further experiments shall be tried, and may probably form the subject of a future communication.

Post-mortem Examination.—External Appearances fourteen

* I cannot account for the unlabeled bottle containing the pills in the surgery, as I have never allowed strychnia, in any form, to be kept there. When necessary, I have invariably had the prescription made up at the chemist's who is in the habit of supplying the hospital with medicine: they are then given to the head-nurse, who keeps them in his own room in a desk, under lock and key. It is now more than a twelvemonth since the then head-nurse died; and it seems probable that those who were employed to clear his cupboard, desk, &c., &c., removed this bottle into the surgery.

hours and a half after death.—The whole surface of the body was of a deep livid colour, the arms and neck especially, the most dependant parts of which were almost black. The anterior parts of the abdomen and legs were less discoloured. The general expression of the face was that of a person who had been strangled or suffocated. The eyelids were puffy and œdematous; also the scalp and face. The conjunctivæ were injected. The neck, chest, and upper arms partook of this general œdema. The abdomen was very tense and tympanitic on percussion. The rigor mortis had subsided in the upper extremities, but still existed in the lower. The spine was arched. The soles of the feet were flat and natural; the position of the latter was the same. The fingers and thumbs of both hands were firmly clenched, except the index fingers, which were extended and pointing downwards. The arms were extended along each side. The symmetry of the body was natural. The teeth were firmly set, the jaws rigid, the tongue protruded partly, the gums were bloodless, and the lips puffy and livid. Much bloody froth issued from both nostrils. Both corneæ were opaque and dull; the pupils semi-dilated.

Internal Appearances, fifteen hours after death.—Much blood escaped on cutting through the scalp, and the oozing from the surface of the skull was unnaturally great. The vessels of the dura mater were much congested; the sinuses also. Some opacity of the arachnoid and pia mater was noticed, and the former was upraised by a rather thick, yellowish serum. The cerebral substance, both cortical and medullary, was much softened, and the puncta vasculosa very numerous. The ventricles contained rather more than the usual amount of serum. The spinal canal was filled with bloody serum; the proper vessels of the vertebræ were very prominent and congested, those on the anterior aspect of the arches quite as much as those on the posterior. The spine was opened immediately after the body was turned. The spinal membranes were of a bright scarlet, and seemed everywhere highly injected; the vessels coursing over the medulla oblongata were especially numerous, very tortuous, distended, and of a bright-red scarlet; this organ and the cord itself were less softened than the brain, but still abnormally so, and on close examination I thought the anterior columns were, if anything, more softened than the posterior. The cord partook of the general pathological character of the medulla, being soft and highly vascular. In the part corresponding to the dorsal region, its posterior aspect, a clot of blood, semi-fluid, covering a surface an inch and a half in extent, was found under the membranes. The convulsive movements noticed by the nurse as occurring chiefly on the right side, and in the convulsion which preceded death the right arm was thrown forcibly across the chest, and remained there. Especial attention with reference to this phenomenon was paid on the examination of the nervous centres; but, with the exception of greater turgidity, and injection of the left choroid plexus, nothing was found to account for it. The stomach contained about a pint and a half of semi-fluid, half digested food, composed of debris of meat, bread, potatoes, and fruit. Nothing beyond the ordinary appearances during digestion was noticed in its coats. The duodenum and jejunum appeared red and congested, but no traces of inflammatory action was perceived. The liver was large, congested, and in an advanced stage of cirrhosis; the gall-bladder contained about an ounce of bile. The kidneys were congested, the medullary structure in particular. The pericardium contained about an ounce of clear serum, of the natural colour. The heart was large, flabby, and collapsed; its muscular coat was greasy. The large blood-vessels and auricles were remarkably devoid of blood; the little they did contain was quite fluid, and stained their coats; it was very dark. Both ventricles contained each a clot of dark colour and semi-fluid; each clot weighed about a drachm and a half. The lungs were voluminous, and filled the cavity of the chest; the posterior lobes were much congested; the bronchi and trachea were filled with bloody froth. The blood which escaped in cutting through their coats was quite fluid and very dark. This was the general character of the mass throughout the body. The muscles were of a rich red colour, exuded blood when cut into, and yielded it abundantly when squeezed. The bladder contained nearly a pint of bright, amber-coloured urine, of natural appearance.

Chemical analysis, thirty hours after death.—The process recommended by Messrs. Rodgers and Girdwood, in THE LANCET of June 28th, 1856, was gone through. Separate portions of the residue thus obtained were tried with bichromate of potash, with peroxide of lead, and with peroxide of manganese. All yielded the characteristic violet colour, less evanescent with the peroxide of lead than with the other two.

Nitric and sulphuric acids gave flashes of a blood-red colour, but not persistent.

The chloroform solution, evaporated to dryness on a thin glass plate, yielded a very minute crystalline mass, only visible as crystalline by a strong double lens. Under the microscope, it was composed of crystals, arranged in acicular tufts, radiating from a centre, there oblong plates with dihedral summits, and several globular amorphous masses. An alcoholic extract was also prepared from the decoction made with dilute hydrochloric acid, and this yielded, when evaporated on a watch-glass, a rather gummy, tenacious mass, which, under the microscope, presented star-like crystals, with their radii rounded. Both these masses, touched with a rod moistened by acetic acid, were dissolved in a few drops of water, and administered to a small toad. Several convulsions were produced, decidedly tetanic, resulting in death after about twenty minutes. The galvanic test described by Dr. Letheby in THE LANCET of June 28th, 1856, was also tried, and with a successful result. The reactions with perchloride of platinum, and with the iodide of potassium, on the acetic solutions, were also characteristic. The stomach was cut in pieces, and one half digested in alcohol, acidulated with hydrochloric acid, and boiled for two hours; then the liquid prepared and tested according to the process before mentioned. The other half was treated with water, acidulated by hydrochloric acid, and subjected to the same processes. The colour and galvanic tests yielded positive results with both.

In the experiments upon animals with the material composing the pills, rabbits and frogs were found to show the phenomena of strychnia-tetanus perfectly; but in point of delicacy and susceptibility to the action of the poison, I give decided preference to small toads. Five were killed by it, and they exhibited the phenomena, not only for a longer period, (twelve hours in two instances,) but were almost immediately affected by doses which it took half an hour to produce convulsions in the frog. Their movements were more lively, the tetanoid spasms were brought on again by sounds, when they had ceased for awhile, and although no accurate notes of the doses, period of action, duration, and death were made, yet, in every respect, I am inclined to look upon small toads as eminently strychnoscopic.

I may shortly publish a series of experiments, showing the minimum dose required to render these animals indicators of the presence of strychnia.

An analysis of two of the pills identified as being of the same kind as were taken by the deceased, yielded, by the chloroform separation process, nearly one quarter of a grain of almost pure strychnine, in the form of acetate, and possessing all the characteristics of this salt; hence we may assume that half a grain of commercial strychnia had caused death.

I cannot conclude the history of this case without stating that at the post-mortem examination, and more particularly during the analysis of the contents of the stomach, I received the greatest assistance from my friend, Mr. Vaudin, surgeon, of this place.

St. Helier's, September, 1856.

ON A CASE OF CONGENITAL DROPSY, VESICULAR AND ANASARCOUS.

By W. THOMAS, Esq., F.R.C.S., Pembroke.

THE following are the particulars of a case which occurred in my practice during the past summer, and considering them interesting to the profession, I send them for insertion in the valuable columns of THE LANCET:—

Mrs. I—, pregnant of her second child; the period of gestation unaccompanied by any abnormal symptoms until the latter part of the eighth month. She then had a severe attack of catarrh, with violent cough and copious expectoration, which continued some time, and required rather active treatment. The labiæ now began to swell, and to such an extent did it proceed, that to avoid pressure the thighs were obliged to be kept widely asunder, and she herself to lie flat on her back. The thighs, legs, and feet soon partook of the œdema. Scarifications relieved the enlargement of the pudendæ, but the other swellings did not subside completely until after parturition, which took place without any other untoward symptoms. The child when born was generally œdematous, and had large vesicles over various parts of the body, especially the lower extremities. It was still-born, but had otherwise a healthy, mature appearance.