at distant intervals, but for the last five years he was visited by a fit every five weeks. He was particularly lively before the fits came on, so much so that he used to sing, and his friends invariably diagnosticated a fit from his sprightliness, and the concomitant blush that mantled on his countenance. He was a man easily fatigued, and not very clever at his trade. Though not an ill-natured person, he used generally to seem out of temper, inasmuch that his wife imagined she displeased him; but he always attributed his conduct to the state of his head, complaining of pain and weight over the lateral ventricles. He was of temperate habits, with an appetite usually good. Three of his children died from head affections.

Post-mortem examination.—As there existed some objection on the part of his friends to a post-mortem generally, an examination of the head was only obtained. There was nothing in the outward configuration of the cranium to attract particular notice, but the development of the lower maxillary forcibly reminded me of Hunter's only pun in allusion to the growth of the lower jaw in proportion to the diminution of intellect. The arachnoid membrane was thickened, strong, and opaque, and capable of bearing much and violent extension when drawn between the hands. The turgescence of the vessels of the brain and investing membranes was sufficiently evident, notwithstanding the abstraction of blood, and there was serous effusion on the surface and in the ventricles, amounting in all to about seven ounces. The cineritious substance, which is generally soft and pulpy, was in this instance unusually firm, and the character of induration particularly attached to the pons varolii, corpus callosum, and medulla oblongata. Indeed, the latter, in consistence, approximated more to tendon, resisting the forcible compression of my finger-nail, and only yielding to a section of the knife. The olfactory nerves were very dense and persistent, bearing as much tension as very strong cords, and with difficulty evulsed from their middle origin on the posterior convolution of the anterior lobe of the cerebrum; they were deposited in a fissure nearly an inch deep, instead of a shallow triangular groove. On opening into the ventricles, clusters of hydatids presented to my view, attached to the choroid plexus on either side of the mesian line.

In reference to this case, I am not unwilling to confess, that had I been aware (when hurriedly summoned to his chamber) of all the minutiae which I have just now detailed, I should have hesitated, in some measure, before I adopted venesection. Nor would my objection arise so much from the conviction of the absence of its necessity, as from the fear of the consequent debility tending ill to promote the process of absorption. His being frequently bled before, and deriving relief from the proceeding, in this as well as former instances, might be deemed sufficient evidence to guarantee such a procedure; and, no doubt, by lessening the sensibility of the cerebral structure, was calculated to make it less susceptible of the irritation which must have resulted from so morbid a condition as the post mortem disclosed. Nor is it to be lost sight of, that the occasional paralytic convulsions which ensued must necessarily impede the circulation of the brain, producing congestion, and thus increasing the danger; and that whatever tends to alleviate such symptoms, must be considered advantageous. Still, in such a case as the present, I am of opinion that leeches to the temples and iced applications to the head would be preferable, by far, to general bloodletting; and I make these remarks lest it may be understood that I advocate venesection indiscriminately in epilepsy.

There is much in this case to excite speculative theory, as in other epileptic cases which have come under my observation, where the aggravation, if not a fruitful source of the malady, may not be unreasonably attributed to the Godfrey-cordial system of the chemist, and the penny-farthing practice of the shopkeeping "doctors."

In B——, we have a man whose infancy was ushered in with symptoms of arachnitis; and his having lived to the advanced age of fifty-four, only proves how powerful nature is in resisting the progress of disease. It must, too, be evident, that from a very early period, and during the term of his life, there must have been serious obstruction to the mutual exhalation and absorption of the fine serous halitus which is so wisely produced for the purposes of motion between the opposing surfaces of arachnoid membrane. And when we consider the efforts made by nature, in various instances, for the removal of disease, by adventitious formations, and collections of matter, it may not be extravagant to decide, that the hydatids were the result of the exuberant operations of the same cause, and their being connected with so vascular a texture as the choroid plexus would not at all lessen the probability of this position, being thus once established by the over-active system of the cerebral circulation, giving rise to the effusion of coagulating lymph, which subsequently became organized in the form of hydatids, proving a new source of irrita-

tion to the serous secreting membranes, and thus exciting the aqueous deposit, which, by suspending the hydatids in a floating position, tended to remove, in some degree, their irritation and friction from the nervous centre, until the very effort of nature to remove irritation became, by accumulation and quantity, another cause of derangement, and by pressure gave rise to the convulsions and coma, with which this man's health was so frequently interrupted during life.

Should we adopt this as the rationale of B——'s disease, we are constrained to admire the power of nature in restoring him so frequently, by the process of absorption, to his wonted consciousness and avocation, and may learn a lesson towards assisting her in the work, by directing our attention to the causes which produce epileptic symptoms. Perhaps the absence of success in the treatment of epilepsy is to be attributed in some degree to its not being applied in the early stage of the disease, and that epilepsy itself is only the sequence of other maladies. Remedies would have more influence before the brain becomes disorganized from causes unnoticed in infancy, and effects themselves in turn becoming secondary causes, producing changes of structure which might have been prevented by timely treatment. The case related by Dr. Elliotson, of the lady who, when a child, was subject to epilepsy every few weeks, but which ceased when the menstrual period came on, indicates, to my satisfaction, that by proper evacuations, with local depletion by leeches, and the skilful administration of calomel, combined with cold applications to the head, as circumstances may warrant, the cause of the disease might have been obliterated in this individual, and we might not have had to record the disagreeable sequel, that when menstruation ceased, she had pain in the occiput for five years; that the disease returned, and she had a fit every year or two, when one day she suddenly fell down dead. Here the natural evacuation arrested for thirty years the progress of a disease which might have been eradicated, but appears only to have been counterpoised; and, as soon as nature's remedial efforts ceased, the dormant malady arose from its slumbers, and terminated in the death of its victim.

Bridge-road, Lambeth, March 10th, 1845.

ON SOME NEW INJECTIONAL FORMULÆ IN THE TREATMENT OF URETHRAL, VAGINAL, AND UTERINE AFFECTIONS.

By THOMAS CATTELL, M.D., Surgeon, Braunston.

DURING the past year several cases of gonorrhœa came under my care, in both sexes, in whom the administration of copaiba and cubebs, in their usual forms, superinduced gastric and nephritic symptoms, which coerced me either to abandon their employment, or to adopt some less objectionable modes of use.

On consideration of the subject, the injectional mode appeared to be the only one of sufficient utility, but this was not accomplished for a considerable period, owing to the peculiarity of those substances. However, I am happy to state that, after repeated efforts, I succeeded in forming an aqueous impregnation, well adapted for injectional purposes, and which will, I anticipate, from the simplicity and practicability of their formula, be found to supply the desideratum particularly alluded to by Mr. Oates, in an extract lately made into THE LANCET.

These processes pharmaceutically embrace the constitution of an aqua copaibæ and cubebæ. They are as follow:—

I. Distilled water of copaiba and cubebs.

R. Ol. copaibæ, (or cubebs,) two ounces; water, five gallons and a half. Draw over from three to four gallons.

II. Extemporaneous water of copaiba and cubebs.

1. R. Ol. copaibæ, (or cubebs,) two ounces; magnesiae carb., six drachms. Rub together, and add four gallons, or less, of water. Filter.

2. R. Ol. copaibæ, (or cubebs,) as in the preceding; but use pulverized pumice-stone, sand, Bath-brick, in the place of the magnesiae carb.

III. Saccharized caustic solution of the oils of copaiba and cubebs.

R. Ol. copaibæ, (or cubebs,) one drachm; caustic potash, (or soda,) half an ounce; white sugar, six drachms. Twenty-four ounces of water to be added gradually.

IV. Saponiform solution of the respective oils.

R. Ol. copaibæ, (or cubebs,) two ounces; caustic solution of potash, (or soda,) one ounce. Rub together in a mortar, and add water as may be required.

As it is relevant to the present subject, it may not be amiss here to state, that I have applied the same chemical formula with but trifling variation, in producing an aqueous impregnation of the oils of turpentine, ergot of rye, creosote, &c., and used them in

the treatment of uterine hæmorrhage, and inaction of the uterus during parturition, with the utmost success.

In one case of uterine hæmorrhage, occurring subsequently to delivery, I employed the aqueous solution of the oil of ergot three times during two hours, when the cessation of the sanguineous discharge clearly indicated the absence of any further danger.

In two or three cases of dormant action of the uterus during parturition, I employed the injection of ergot with immediate effect. I have, notwithstanding, proceeded in these cases with extreme caution, from the supposed influence of ergot in producing, when taken internally, fatal results to the fœtus in utero.

The injectional formulæ here advised will, I have no doubt, be found efficacious in morbid conditions of the uterus and vagina not alluded to; and I shall therefore feel most gratified in hearing the results obtained by the experience of my professional brethren.

I have hesitated in laying the preceding practice before the profession, from the extreme annoyance I have met with in those cases where I am the most desirous to apply it, but practitioners in large towns will not meet with this difficulty.

Braunston, Northamptonshire, Nov. 7th, 1845.

PECULIAR CASES IN MIDWIFERY.

By THOMAS TORRANCE, Esq., Surgeon, Andre.

IN THE LANCET for the 1st of November, I observe a case of expulsion of the entire ovum, at the full period of gestation, by Mr. W. Symonds Rootes. The two following cases having occurred in my practice, a record of them in the same journal may prove interesting to the profession.

CASE 1.—I was called, about mid-day of the 22nd May, 1837, to a Mrs. T—, aged twenty years, wife of a mechanic, in labour for the first time, of a slender make, but having a large capacious pelvis. After an easy labour, she was delivered, about seven o'clock, P.M., of a full-sized, well-formed, male child. Having tied the umbilical cord, and handed over the child to the nurse, I turned my attention to the mother. Upon placing my hand over the uterine region, and making gentle traction with the cord, she gave a groan, and by one expulsive effort a second child was born, enveloped in the membranes, together with both placenta attached. I lost no time in separating the membranes, and exposed the child, also a male, but much smaller than the former, and which survived only a few days. I have been in attendance several times upon the mother at subsequent confinements, but have seldom been forward in time, her labour being too expeditious.

CASE 2.—Mrs. W—, the wife of a farmer, and the mother of several children, was taken in labour during the night, in the month of August, 1839. I was called about seven in the morning, and, upon my arrival, found the nurse with one child, a male, upon her knee, which had been born about fifteen minutes. Upon my going to the mother, who was in bed, I was told by her that *all* had come away, but had not been removed. Upon introducing my hand under the bedclothes, I found something unusually bulky, which, upon examination, turned out to be a second child, enclosed in the membranes, together with both placenta attached. I need scarcely add, that this second child, which was a female, was dead.

Expulsion of the second child, enveloped in the membranes with the placenta, in twin cases, I believe is not at all a rare occurrence at the full period of gestation, at which time, however, I have never met with it in cases of single births, though frequently in cases at the seventh month, particularly when the child was dead.

Andre, Nov. 11th, 1845.

EXTRAORDINARY RECOVERY AFTER TAKING ESSENTIAL OIL OF ALMONDS.

By FRED. HETLEY, Esq., House-Surgeon, Middlesex Hospital.

THE following unusual case of attempt at suicide with the essential oil of bitter almonds may prove interesting to the profession. So few instances are on record of the symptoms and *modus operandi* of hydrocyanic acid in those who have survived its baneful action, that I am the more desirous the medical public should be put in possession of the curious morbid phenomena observed in the case I am about to report.

On the evening of the 29th Nov., 1845, at nine P.M., Harriet L—, a respectable and well-dressed female, aged twenty-one, was brought into the MIDDLESEX HOSPITAL by four policemen, in a most excited state, not unlike a person who has freely indulged in champagne. It was stated by the policemen that they found her on the pavement, in Charles-street, Soho-square, and brought her immediately to the hospital. A broken bottle, labelled "poison," found on the pavement, was produced, which

strongly smelt of the essential oil of bitter almonds. On questioning the girl as to her feelings, and whether she felt ill, she slowly answered, "Indeed, I do feel dreadfully ill;" and, passing her hand over a very exsanguine countenance, she leisurely fell back in her chair, and became perfectly insensible. The respirations were noticed to be slow and regular, like a person under the effects of a full dose of laudanum, but the pulse small, thready, and at least 130—140, and the pupils contracted to an aperture of the size of a pin's head. She continued in this state for about three minutes, when the countenance suddenly assumed a pale livid hue, similar to that of an individual with advanced cardiac disease. An emetic was attempted to be administered, but all power of deglutition had ceased. The stomach-pump was then applied, and the breathing, which both before and during the whole operation remained slow, now became stertorous.

The contents of the stomach were first drawn off, consisting of about two ounces of dark-brown fluid, emitting the powerful smell of oil of bitter almonds. The stomach was now four times washed out with water, and as each basinful was drawn off, the smell of the poison became fainter and fainter. Towards the termination of the operation, the stomach regained some tone, and occasional powerful efforts were made to vomit. During this period, the bladder and rectum acted involuntarily. Before the stomach-tube was removed, a solution of chlorine was injected, and the patient was then carried up to bed, still comatose, and the pupils unaltered. On visiting her in the ward in the course of a quarter of an hour, she appeared like a person in a deep sleep, and on feeling her pulse, which still remained 140, she suddenly roused, and, looking wildly about her, with a maniacal appearance, inquired where she was. The pupils now suddenly dilated to their fullest extent, and she was unable to see distinctly. She stated that she bought two penniesworth of oil of bitter almonds, which she swallowed in the street, then threw away the bottle, and almost immediately afterwards fell senseless on the pavement. She now complained of excessive burning heat in the regions of the larynx and pharynx; was hoarse; and talking, she said, distressed her; some pain and sensation of heat in the epigastrium, but no tenderness on pressure. The pulse gradually came down to 100. She expressed a feeling of general numbness in her legs and arms, without pain in them; but on pinching the extremities she cried out. The arms and hands were mottled with a livid hue, and colder than might have been expected from the time she had been between warm blankets. The solution of the chloride of soda, half an ounce, with compound spirit of ammonia, was now administered every three hours, and a sinapism was applied to the epigastrium. She evinced great disposition to sleep, but was easily roused, and on visiting her at four separate periods, within two hours, she was found each time in this light kind of sleep. During the night she got up and passed her water, and would have slept during the whole twelve hours she was in the hospital, had the nurse not disturbed her to give the medicine; moreover, we strictly charged the nurse not to suffer her to sleep for any lengthened period. In the morning, the friends came forward, desiring to remove her to her home, when she gladly and hastily dressed herself, and walked down stairs with them into a cab.

The following are points particularly worthy of notice in this unusual and interesting case:—The quantity of the poison taken was insufficient to cause instant death, as would have been the case with hydrocyanic acid, and yet the subsequent coma would doubtless have terminated fatally, if the timely use of the stomach-pump had not been resorted to. On her admission, the effects of the poison on the nervous system were gradually fading, as she could be roused, and incoherently talked, and answered questions, as before remarked; but a proof that the whole strength or power of the poison had exerted itself on the nervous system, may be deduced from the fact, that the spinal column and brain were primarily affected, producing involuntary action of the sphincters, loss of sensation in the extremities, and (through the medium of the phrenic nerve) the slow breathing of narcotism, whilst, on the other hand, the vascular system was only secondarily affected, producing the rapid and almost countless pulse. The lividity of countenance, which so suddenly attracted our notice, was doubtless from the delay of the circulation through the pulmonary system, and not from any primary or specific action of the poison upon the respiratory organs, so that this lividity may be explained on the same pathological grounds as that produced by obstructed mitral or bicuspid valves—viz., a delay of blood from the right to the left side of the heart.

It appears from the above facts, that the chief action of the poison was spent on the ganglionic portion of the nervous system; if it were not so, how would the reader explain the unusual pathological fact, that the respirations were but twelve, whilst the heart was 140, knowing, as we do, that in health, as well as in disease, those two departments of the respiratory system are nearly accurately balanced? Moreover, as a proof of the correct-