bowels continues; there are a few more spots on the abdomen; tongue not so thickly coated; is a little more rational.

Dec. 1st.—Is better, and answers questions; skin and pulse as before; cannot protrude the tongue from the accumulation of sordes about the teeth and lips; passed a large quantity of very foetid pus from the bowels this morning; takes food and medicine well.

2nd.—Skin dry; pulse 140; thick black sordes about the mouth; respiration hurried, 40 per minute; slight cough; large crepitation on both sides of the chest; abdomen still very tender; motions dark-coloured, containing a little pus, soft, but not watery in consistence; does not wander so much at night.

3rd.—Skin warm and moist; pulse still 140; she can now protrude the tongue, which is not so much furred, but the thick sordes are present.

5th.—About the same; pulse weaker; cannot protrude the tongue; stools not so offensive; cough slight; râles heard on both sides of the chest.

6th.—Symptoms of great prostration set in suddenly, which ended in death on the 7th.

At the post-mortem examination, the cæcum was found perforated, which had produced peritonitis. The left lung was in a state of hepatization.

GUY'S HOSPITAL.

CHOREA FOR THE THIRD TIME, PRECEDED ON EACH OCCASION BY A CUTANEOUS ERUPTION; NO HISTORY OF RHEUMATISM; RECOVERY.

(Under the care of Dr. OWEN REES.)

It will be observed that in all the cases of chorea now recorded, the treatment varied according to the special indication, and the choice of the physician. In one, quinine and iron, with shower baths, effected a cure; in another, the oxide of iron alone; in a third, a simple carminative mixture; and in a fourth, arsenic: of course the regulation of the functions of the chylopoietic viscera was attended to. The application of splints to the arms, when made use of, materially helps in quieting the movements of the patient, and is well worthy of a more extended trial in uncomplicated cases.

One of the most common causes of chorea in children is fright. We recollect seeing a case of the disease in a girl, fifteen years of age, who was a patient of Dr. Farre, in St. Bartholomew's Hospital, in January last, in whom it was suddenly brought on by a vivid flash of lightning during a thunder storm, five weeks before admission. The cure was somewhat tedious.

In the first of the two cases which are subjoined the boy had chorea twice before his present attack, and each time it was preceded by a cutaneous eruption. Its coincidence with cutaneous complaints has been attributed to irritation of the peripheral extremities of the afferent nerves by the particular eruption, whatever that may be,—that is, if the eruption is not an accidental one, like that of measles or scarlet fever.

The notes of the following case were taken by Mr. W. R. Grove, one of the hospital pupils.

Francis R—, aged ten, admitted Feb. 20th, 1860, into Stephen ward, under Dr. Rees. Is a delicate-looking boy, suffering from chorea. Has had chorea twice before, and was treated in this hospital by Dr. Wilks. Before the disease showed itself he was covered with a rash; some of it remains about the feet, and presents all the appearance of scabies. His appetite is sometimes ravenous, and at others he is able to eat scarcely anything at all. He does not think he has worms; has never noticed any. Has at times, during the last four years, had palpitation of the heart. The night before his admission he had what his mother terms a "fit." His bowels are confined; appetite good; pulse 96. Complaints of a slight cough. Ordered powdered scammony with colocynth, fifteen grains, at once; and half an ounce of infusion of quassia thrice a day. His stools to be inspected for worms.

Feb. 22nd.—His bowels were freely opened, but no worms were found.

24th.—Ordered compound sulphur ointment to be applied to his feet every night.

27th.—Bowels again confined. To repeat the powder. In other respects he seems better.

March 3rd.—Quieter; evidently improving.

7th.—Ordered a drachm of the sesquioxide of iron thrice a day. Continues to improve.

12th.—Still continues to improve.

29th.—Is all but convalescent.

CHOREA, ARISING FROM NO SPECIFIC CAUSE; RECOVERY.

(Under the care of Dr. WILKS.)

In this case we avail ourselves of the notes of Mr. John C. Gooding, one of the pupils.

Maria H—, aged eight years, admitted 19th May, 1859. Both father and mother are free from rheumatism. The former has been for the last two years a lunatic. The patient has been healthy, and has never been the subject of rheumatism. Two weeks ago choreic movements first began to make their appearance, and have continued to increase up to the present time. She has not been exposed to any known exciting cause, as fright, nor has she been with children the subjects of chorea.

On admission, she is of fair complexion, of sharp intellect, and is apparently in perfect health. There are the characteristic movements of chorea present, the hands, feet, tongue, &c., being affected to a moderate extent. A soft systolic bruit is distinctly audible below and a little to the left of the left nipple, gradually decreasing in intensity in every direction from this spot. Bowels regular; tongue clean. Ordered eight grains of powdered rhubarb, with calomel, at once, and a mixture of syrup of orange-peel and compound tincture of cardamoms thrice a day.

June 8th.—The jactitations have almost entirely ceased; the bruit is as distinct as when admitted. Discharged cured.

CHARING-CROSS HOSPITAL.

ACUTE CHOREA, SIMULATING SYMPTOMS OF CEREBRAL DISEASE, ACCOMPANIED BY SPASMODIC SCREAMS; COMPLETE RECOVERY.

(Under the care of Dr. WILLSHIRE.)

THE following case shows the chorea to have been hastened and made seriously worse by emotional causes. The extremely severe automatic movements gave rise to the suspicion of mischief about the cord or its membranes. It was early accompanied by such disturbance of the mind as to lead to the belief that the original choreic disease was associated with hysterical mania, or with actual organic disease of the brain or its meninges, shown by the violence of the movements, the screaming, biting, delirium, &c., necessitating for three days the use of the camisole. The rather sudden change from violence to a quiet state, accompanied by a dry typhoid tongue, weak pulse, and muscular exhaustion, was followed by a speedy recovery under the use of ammonia, quinine, beer, wine, and meat diet; but previous to the exhibition of these, the treatment consisted of free purgation and the exhibition of arsenic.

In the whole course of our experience, we do not remember having seen such a remarkably violent case. It strongly simulated an attack of acute mania, accompanied with great bodily exertion, which bathed the patient in a most profuse sweat. The peculiar kind of screaming seemed to be the result of choreic spasm of the muscles of the larynx, which forced the sounds, as it were, from the patient.

The present example forms a not unfit companion to one recorded in a former "Mirror" (vol. i. 1859, p. 261), under Dr. Barker's care, at St. Thomas's Hospital, in which the chorea was associated with violent hysteria, followed by temporary dementia when upon the eve of recovery.

For the notes of the case we are indebted to Mr. J. S. Belcher, clinical clerk.

Elizabeth P—, aged nineteen, housemaid, of general good health, regular at the catamenial periods, bowels habitually much confined; had suffered a great deal from low spirits the last six months. About three months ago, she felt an uneasy sensation in the left foot, which afterwards extended to the leg and thigh, and subsequently the whole of the left side became affected. She then noticed her arm and leg move spasmodically, and she often had to cross her right leg over the left in order to keep it still. About the same time, she noticed that she could not pronounce her words as distinctly as before, and that she every now and then dropped a syllable.

She was admitted on April 24th, with acute chorea, accompanied by partial loss of consciousness. The attack was so