She afterwards became an in-patient of the *General Hospital*, when pytalism was produced, which continued for eight weeks, and 190 leeches were applied to her leg, followed by five successive blisters, and at last she was discharged without relief. A physician was next applied to, and salivation was kept up for three weeks without the leg becoming at all improved. The *Nottingham Dispensary* next received her as an out-patient. Leeches were then applied to her shin, and the infallible mercury exerted its full action upon her for three months. Sarsaparilla was also administered, but still the obdurate leg would get worse, and she was dismissed incurable. For a second time she became an out-patient of *Saint Mary's Dispensary*, and was mercurialized for three weeks without success. She then applied to the *Nottingham Dispensary*, and was admitted an out-patient under a different surgeon, who prescribed mercury and *decoct. sarsæ*. for five weeks, but the pain in the leg continued to be so dreadfully acute that she was unable to obtain any sleep whatever at night, and, at last, finding that not the slightest benefit was derived from her attendance at the Dispensary, she voluntarily withdrew. Another physician then took charge of her, salivated her for a month, blistered the limb repeatedly, and at last recommended her to try, for a third time, the *General Hospital*, telling her, at the same time, that he did not know what to do with her. In the Infirmary she continued for eleven weeks. Severe pytalism was kept up, and the limb was cauterized 33 times during that period; she was then discharged without relief.

I ought to state, that for five years antecedent to this time she was a confirmed opium-eater, never being able to obtain sleep before six in the morning, oftentimes later.

In November last she applied to me. I found her extremely emaciated, the right leg very much swollen, tense, and inflamed, and with a surface so bright as to reflect distinctly any object held above it. The pain was intense and continued. I immediately cut down upon the bone, dividing the periosteum to the extent of eight inches from the tubercle of the tibia downwards. The pain instantly left her, and for the first time for five years, she enjoyed a comfortable night's repose. Her regimen was changed from slops to broiled mutton, and a pint of ale daily. In a month the wound was perfectly healed, and since that time she has never had the slightest uneasiness from it. Pains in the head alone remain, but these are rapidly decreasing under the use of the bichloride of mercury, given in the dose of one-twentyfourth of a grain thrice daily. Her general health is good, and her frame has recovered itself entirely.

CASES ILLUSTRATIVE

OF THE EFFECTS OF THE

SALINE TREATMENT IN MORBID CONDITIONS OF THE BLOOD.

By C. R. BREE, Esq., M.R.C.S., *Stowmarket*.

THE following cases, selected from several others in my case-book, may not be uninteresting to the practical physician, proving the efficacy of Dr. Stevens' method of treatment in diseases of the circulating fluid.

CASE 1.—*Typhus Gravior. Petechiæ.*

W. B., æt. 60, of a spare cachectic habit of body, has been afflicted with epileptic fits almost every day for the last twenty years; having been subjected to the infection of typhus fever, of which his son (who died) and several others, had been previously affected in the same house, he caught the disease, and applied for my advice while labouring under the following symptoms:—

September 30th, 1834. I found him lying in bed, in a state of apathy and indifference to external objects, from which condition he could be with difficulty aroused. He had been attacked with a severe rigor on the previous day, after which the disease quickly developed itself. He complains of much pain in the head; his skin is hot and dry; the tongue dry, and covered in the centre with a brown fur, the edges being of a deep red, and having a shrivelled appearance; bowels confined; pulse quick and hard; he has muttering delirium, and the expression of his countenance is wild and vacant.

I bled him to the amount of twelve ounces; after which I gave him an active dose of calomel and jalap, and directed it to be followed up by saline aperients, with antimony.

October 1. He is in much the same state as yesterday; the bowels have been freely opened; symptoms of cerebral oppression continue; pulse softer; skin still hot and dry.

Roso capitis applicatur lotio frigid.

Admoveatur nuch. empl. canthar.

Habeat hydrarg. submur. gr. iij, cum pulv. ant. feb; gr. ij 4tis horis.

Ant. mist. salin. sine magnes. sulph.

2. Much the same. *Cont. remedia.*

6. He has continued the mercury and antimony, but the symptoms have gradually become worse; no pytalism has been induced; the body is now covered with spots and petechiæ, some of which are lenticular and rose-coloured, while others are round and purple; they are observed more particularly on the breast and shoulders, while there are very few on the inferior extremities; the tongue is covered with a dark brown fur, and is fissured and tremulous; stools bloody and passed involun-

tarily; the urine high-coloured and scanty; there is no pain, on pressure, in the abdomen; he appears to be sinking.

R. *Sodæ carbon.* ʒ ss; *Sodæ mur.* ʒ j. *Potass. chlorat.* gr. viij. *Fiat pulv.* 4tis *horis sumendus.*

Habeat vin. rubri unciam 2dis horis.

7. He has rallied a little, but the symptoms are very urgent; the motions are composed almost entirely of blood; he complains of numbness in the extremities; has been bleeding from the nose and gums.

Cont. pulver. salinæ. Aug. *vin rub.* ad ʒ iss.

8. He is something better; has not passed so much blood from the bowels; the tongue looks better, and the pulse is evidently affected by the wine. I directed him to continue the powders, and to take the wine every six hours.

9. He is decidedly better; the sanguineous discharges have nearly subsided; the petechiæ are fading; tongue cleaning.

He continued this mode of treatment for nearly a week, during which time the symptoms of putridity gradually subsided; the petechiæ disappeared, and the tongue became cleaner. He ultimately recovered, his convalescence being much assisted by the exhibition of quinine and soda.

During the existence of fever, he had no attack of epilepsy, but the febrile symptoms had entirely subsided about a month from their commencement, when his daily attacks came on with as much violence as ever.*

CASE 2.—Continued fever. No petechial eruption.

J. T., æt. 8, was attacked with symptoms of fever on the 4th of August, 1836. His two sisters had previously been affected with, and recovered from, the disease. When I first saw him, the day after the attack, I found him labouring under considerable cerebral excitement; skin hot and dry; the tongue was covered with a brown fur, and quite dry; his pulse was quick; he had slight abdominal tenderness, and frequent febrile paroxysms in the course of the day.

I applied leeches to the head; ordered the body to be continually sponged with vinegar and water; administered mercurial purges and salines, with antimony. By this mode of treatment the symptoms were moderated, but there was always a strong tendency to fall into that low or adynamic state so much to be dreaded in this disease.

* This patient died about a year after his recovery from this illness, but no appreciable lesion could be discovered upon examining the brain, which was done very carefully. We found a large gall-stone in the gall-bladder. Query, Could this have existed for 20 years in the situation in which we found it; and if so, could it have caused the daily attack of epilepsy?

On the 17th, I was summoned to him in consequence of his friends considering that he was dying. I found him certainly worse; he had a hot dry skin; foul tongue, though moist; obscurity of intellect; cough; weak, yet inordinately quick pulse. I ordered him the following:—

R *Sodæ carbon.* ʒj; *potassæ chloratæ* ʒj; *vin antim. tartar.* ʒij; *syr. papav. a.* ʒij; *aquâ purâ* ʒ6; *M. ft. mist. de qua sumatur. cochl. magnum* 3tis *horis.*

19. He has been better from the end of the first twelve hours after taking the saline medicine. *Cont. misturâ.*

21. Continues to improve; the tongue is cleaning; the delirium has entirely left him; the skin is moist, and he has inclination for food.

I directed him to continue the saline medicine, and to have meat diet, with a little mild beer; and, under this treatment, in ten days he was convalescent.

CASE 3.—Purpura Hemorrhagica.

W. Rose, æt. 1 year and three months, has been a weak and sickly child ever since its birth. About a fortnight before I first saw it, the upper eyelids were observed to become dark, and livid spots to appear upon various parts of the body. Its condition at present is the following:—

April 17th, 1836. The eyelids of both eyes are in a complete state of ecchymosis, and are quite black; they present, in fact, the appearance which results from a blow; there is also a patch of effused blood beneath the mucous surface of the lower gum. The child cannot walk, and it has a very unhealthy appearance; and the mother says, that, occasionally, patches appear upon different parts of the body, which remain out for about 24 hours, and then disappear. Small livid pimples also appear occasionally, upon the back and forehead, which remain for a longer, though indefinite, period; the child was only suckled for two months. The bowels are almost always loose, but there is no appearance of blood in the motions; it has only one tooth, which is on the lower gum, the upper gum being rather tumified, and also appearing rather livid; I lanced it, and ordered the following medicine:—

R *Acidi citrici* ʒij; *tinct. opii camph.* m. xx.; *Syr. aurantii* ʒss; *aqu. pur.* ʒj; *M. ft. coch. purv. ter die.*

Habeat inf. hyd. c. creta, gr. iij, *alt. a hs.*

22. The black patch on the gum has nearly gone, but the lividity of the eyelids is much the same; the bowels are still very loose; the appetite bad.

I ordered three grains of chalk with opium to be added to the night powder; and the quinine mixture, with sulphuric acid, to be substituted for that previously prescribed.

27. The gums have bled considerably for the last two days; the red patches still appear in the morning, but they quickly subside; the bowels still loose.

I ordered the dose of quinine to be increased, and the muriatic acid to be substituted for the sulphuric;

Habeat ferri tartar, gr. iij. ter die.

This treatment was continued, with little alteration, for several weeks, with variable success. At one time the child appeared to be doing well, and its general health to be improving, but this was not permanent, the bleeding from the gums occurred again, and the ecchymosis of the eyelids re-appeared, nor was the child's general health much improved. Under these circumstances I determined to give the saline treatment a trial, and therefore ordered the following:—

June 1st. R *Sodæ carbon.* ℥ij; *sodæ mur.* 5ss; *potass. chlorat. gr.* x.; *syr. ros.* 3ss; *aqu. pur.* 3j; *M. ft. mist. de qua sumatur cochl. parv. ter die.*

7th. The child is decidedly better. *Cont. mist., sed. augeatur potass. chlor. ad gr. xvj.*

13th. The sanguineous effusion has nearly gone: The child is looking much better in appearance; the gums have not bled since last report. *Cont., sed. augeat. potass. chlor. ad 3j.*

This treatment was steadily pursued for three weeks from the last report, all other medicines being discontinued. At the end of that time the disease was entirely gone, and the child continued afterwards rapidly to gain strength. It can now walk quite well, has cut several teeth in both jaws, and has quite lost all the character of a diseased condition of the blood, which it had when I first saw it.

This case was one of the most satisfactory I ever attended. The rapid change which took place after the commencement of the saline treatment was too decided to leave a doubt as to the efficacy of the remedy administered.

It will be observed, in perusing these cases, that I did not order the saline medicines until others had been tried. I am, however, so convinced of the value of the treatment, that I shall certainly adopt it in other cases of morbid affection of the blood. The result I will communicate in a future paper.

CASE IN WHICH THE DUCTUS COMMUNIS CHOLEDOCHUS WAS OBLITERATED.

To the Editor of THE LANCET.

SIR:—You would greatly oblige the writer by inserting the following, if it should meet your approval. I am, Sir, your obedient servant,

D. P. GARDNER,

Student, St. Bartholomew's Hospital.
Sept. 22nd, 1836.

J. O., aged 25, a master-mariner, previously of strong constitution and temperate habits, had been labouring under jaundice, and consequent oedema, for nearly two years.

About eight months since he was attacked with symptoms of the passage of biliary calculi, which subsided after a few days, and left him better, but very weak; the skin sclerotic, the perspiration and urine perfectly icteroid. From this period the dejections were of a cineritious colour, but otherwise healthy; the peristaltic action of the bowels was rather torpid; the digestion and appetite were good; no symptoms of dyspepsia or intestinal irritation existed; and he was able to enjoy his meals, and to take a little exercise. There was slight dyspnoea; the urine was copious, and darkly coloured at first.

The decided colour of his complexion made him at last very loth to expose himself, and he consequently remained in the house for the last three months, his appetite failing, and from this period there was a return of the oedema; the urine was less in quantity, and lighter, but the stomach was healthy; the debility at last became so manifest, from accumulation of water within the abdomen, that thirteen days before the fatal termination he was confined to his bed. On the 15th of September he complained of very acute pain in the region of the stomach, which subsided in a few hours. Rigors, followed by coma, muttering, and slight delirium, closed the melancholy scene on the 17th inst.

Autopsy forty-eight hours after death.

About three gallons of dark-yellow fluid were drawn off from the abdominal cavity by a trochar.

There having been such decided symptoms of effusion of fluid into the ventricles of the brain, the head was not opened.

The *thoracic* viscera were perfectly healthy; the heart was not at all wasted.

Abdomen.—The stomach, intestines, mesentery, pancreas, and kidneys, were perfectly healthy; the *spleen* firm, but rather increased in size; *great omentum* somewhat injected, and curiously crumpled up, which may perhaps account for the anomalous pain on the 15th inst.

Liver adherent on the upper side to the diaphragm, shrunken externally, and of a slate colour, but healthy in the interior, excepting having the appearance of being *condensed*. The gall bladder contained a little fluid bile, which did not, by pressing the fundus, pass into the duct; no concretions were present. The ductus communis choledochus was obstructed by union of its sides, so as to close both the hepatic and the cystic orifices. The continuation to the duodenum was pervious and quite healthy.

Vena portæ, &c., without any obstruction; no morbid growth any where.