judge, was born at 7.30 A.M. and was perfectly well until 4 P.M. next day, the 28th. I was then sent for in a hurry as the child had brought up quite suddenly a large quantity of red blood and had also passed a considerable amount of black blood per anum. I could not estimate the quantity of bright red blood vomited but it was sufficient to stain the whole front of the nurse's apron. I examined the nose and throat carefully but no cause for bleeding could anywhere be found. The blood could not have been swallowed at birth, because the red arterial character could not have been preserved in the stomach for so long a time, the child being then 33 hours old. Neither was it due to blood taken from the mother's nipple, as she was not going to suckle him and he had not been put to the breast at all. Curiously, the child did not seem to be suffering from the effects of hæmorrhage; he was warm, just a little pale, but apparently not much the worse. I ordered him to be kept quite warm, as quiet as possible, and to have sips of plain water frequently.

At 7 P.M., three hours afterwards, there was a recurrence of the hæmorrhage. This time it was more severe, the nurse's apron being almost saturated with blood, and a large quantity of black blood had been passed per anum. The whole aspect of the child was now changed: there were intense anæmia, a drawn pitiful look about the child, a feeble whining cry, and every appearance of the effects of a severe hæmorrhage. The condition was evidently very grave and any further loss of blood must have proved fatal. It seemed impossible to find any treatment that could be used with any hope of success. I, however, ordered 15 minims of castor oil and the same quantity of olive oil to be given at once in the hope of thus possibly relieving the blood pressure. As the vomited blood was quite red I concluded that it came from the stomach and therefore ordered constant sips of iced water, hoping that the cold might have a local effect on the bleeding vessel. This was continued for 24 hours and no further hæmorrhage occurred, although black blood was constantly being passed per anum. On the next morning the castor oil was repeated. Notwithstanding the hæmorrhage and collapse the child's temperature remained at about 100° F. After 24 hours' administration of iced water the ice was taken out and a little white of egg was added, and very diluted milk (one part of milk to six parts of water) was gradually tried. The child could not digest this, having pain and flatulence after it, probably on account of the long-continued action of iced water on so young a stomach upsetting the digestion. I then tried Allen and Hanbury's humanised milk and this acted well. The motions gradually became normal, the milk was digested, no more hæmorrhage occurred, and the child improved.

When he was three weeks old there were still anæmia and weakness but otherwise everything was satisfactory. I then added half a drachm of Hommel's hæmatogen twice a day to the contents of the feeding-bottle and now at six weeks old the child is practically well.

This was presumably a case of *melæna neonatorum*, a condition of which Professor W. Osler states that its nature is unknown and that the mortality is very high. Dr. J. F. Goodhart says that it is a very serious affection and in most cases fatal.

St. Asaph, North Wales.

Clinical Notes:

MEDICAL, SURGICAL, OBSTETRICAL, AND THERAPEUTICAL.

TWO CASES OF ACUTE POISONING BY OIL OF EUCALYPTUS.

By F. LUCAS BENHAM, M.D. LOND., M.R.C.P. LOND.

IN THE LANCET of Sept. 30th, p. 963, Dr. Henry S. Taylor reports a case of acute poisoning by the ingestion of a teaspoonful of oil of eucalyptus and asks whether any of the readers of THE LANCET have had a similar experience. Six years ago I had an almost precisely similar case. During an epidemic of influenza I was attending a man, aged about 40 years, for that complaint.

His wife was going to administer a dose of medicine during the night, but by inadvertence poured out oil of eucalyptus instead from a bottle that was standing close by. About a teaspoonful of this was swallowed. The rest of the dose was rejected owing to the pungent sensation it produced. The man speedily became unconscious and I was sent for. I found him unconscious, almost comatose, and looking as if he were in a condition of surgical anæsthesia. There was no vomiting. I managed to rouse him sufficiently to swallow an emetic which brought up the poison. He rapidly came to himself and in a few hours had recovered from the effects of it.

About a year afterwards I met with another case. A younger man had swallowed about a teaspoonful of oil of eucalyptus as a medicine and soon became lethargic and partially comatose. I was sent for and arrived speedily, before the symptoms had time to become aggravated. An emetic gave prompt relief.

Until I saw the above cases I was accustomed to regard eucalyptus as innocuous. Considering the frequency and freedom with which the substance is employed as a domestic remedy I wonder that serious results are not seen more often, but I think that small doses are seldom exceeded. I have made inquiries as to whether fatal cases of poisoning from eucalyptus are known but hitherto have not met anyone who has had personal experience of such and I do not know of any that have been recorded. I should be glad to know if any such have occurred.

Can any of the readers of THE LANCET supply details of poisoning by oleander? There is no doubt that the shrub is toxic, but to what extent is it toxic, and what instances of poisoning thereby have actually occurred? There is no mention of it in the last edition but one of Taylor's "Principles of Medical Jurisprudence." I have heard a story of soldiers having been poisoned (in the Crimean war?) through cooking their meat on spits cut from this shrub. Is this authentic? I have also heard of oleanders growing in a garden having been supposed to be injurious to children. I think this must be an exaggeration. Here in South Australia the oleander grows to the size of a small tree and it is such a handsome ornament to the garden that it would be a pity to banish it.

Exeter, South Australia.

A CASE OF CARBON MONOXIDE POISONING.

By P. C. P. INGRAM, M.R.C.S. ENG., L.R.C.P. LOND.

THIS case is recorded as an example of carbon monoxide poisoning in which the gas was produced by the incomplete combustion of the contents of a burning building.

The victim was an elderly man, the proprietor of a small shop which was built under part of a railway arch and consisted of three rooms, one on the ground floor and two above, the back room on the upper floor being lighted only through the one in front. The place caught fire and in the back room, which was used as a bedroom, he was found by the firemen. He was then dead and was seated partly dressed on a chair with his head and arms resting on an adjacent table, having apparently been overcome while asleep. On my arrival the body was still warm but rigor mortis had commenced. It was covered with soot but was not scorched.

The post-mortem examination was made two days later. Bright pink post-mortem stains were visible on the back and under surface of the legs and arms; in these dilated superficial vessels were well seen. The lips were pale, the eyes were half closed, the pupils were of normal size, and the conjunctivæ were slightly injected. The veins of the pericranium and cerebral cortex were dilated, the blood being of the characteristic pink colour, and there was an excess of cerebro-spinal fluid both round the base of the brain and in the ventricles. The respiratory tract from the pharynx to the bronchi was full of a mixture of soot and mucus, and there was some injection of the tracheal mucous membrane. The lungs were full of bright red blood. Both sides of the heart were contracted and empty; there was also evidence of old valvular disease. The vessels of the stomach were injected and the mucous membrane in the neighbourhood of the cardiac orifice was stained from swallowed smoke. The intestines were normal. The liver was of a bright red colour and the spleen and kidneys were also of lighter colour than