Lincolnshire. At the time of being admitted into the institution, he passed saccharine urine to the extent of twenty-eight pints daily, and was affected with the characteristic symptoms of the malady, as excessive thirst, dry and rough skin, wasting of the body, voracious appetite, constipation, &c. The Doctor ordered a warm bath, cupping over the loins, fifteen grains of Dover's powder with two of calomel, to be taken at bed time, and a drachm of compound jalap powder the following morning, with the common diet of the hospital. This treatment having failed to produce any beneficial effect, the Doctor directed a quarter of a grain of emetic tartar, dissolved in an ounce of water, to be taken every second hour, a grain of opium at bed time, a pint of lime water with an equal quantity of milk daily, and the loins to be rubbed twice a day with the ointment of tartarized antimony. The symptoms continuing unabated after this treatment had been adopted four days, the Doctor prescribed the following mixture :—

Take of Hydrosulphuret of Ammonia, 30 drops ;
Pure Water, 6 oz. Mix.

A sixth part to be taken three times a day. To have animal food twice a day.

After continuing the mixture two days, the quantity of urine was reduced to twenty pints in the course of twenty-four hours. To keep up a regular state of the bowels, the Doctor ordered a pill, compounded of calomel, two grains ; bitter apple, four grains ; and croton oil, one drop :—to be taken occasionally. After persisting in the use of these reme-

dies a fortnight, the quantity of the hydrosulphuret of ammonia in the mixture was increased to twenty drops. The warm bath was sometimes employed. During this treatment, the quantity of the urine and the other symptoms gradually abated ; and in the course of six weeks, when he was much more active in his habits, the healthy function of the skin was restored, the appetite and thirst nearly natural, and the quantity of urine, which was less, reduced to seven pints daily, and less saccharine. At this time, when there was every reasonable hope of a favorable termination of the case, he was dismissed the hospital for irregularity.—*Id.*

V.

ULCERATED CANCER, CURED.

By GEO. FIELDING, M.D.

Mrs. C——, æt. 81, June 1st, 1829.—She informs me that, for upwards of fifteen years, she has had a complaint in the right mamma. Without any known cause, she first discovered a small tumor within the breast, near the nipple ; it very slowly and gradually enlarged, retracted the nipple, and puckered the integuments ; she had not constant, but occasional severe darting pains ; these most commonly came on in the night, when they awoke her from sleep. She has been several times ill during this period, and has had medical advice, but did not mention the complaint in her breast. About five weeks ago she slipped and fell, in the house ; hurt her right hip, and “shook” herself a good deal. Soon afterwards, the breast began to give more pain, and distressed her so much that

she was induced to show it to the attending physician and surgeon, who have prescribed up to the present period. For some time previous to the accident, cracks and small openings formed in the integuments, which discharged a thin bloody fluid. There is now an ulceration extending from the outer edge of the pectoral muscle within the axilla, towards the inner edge,—say about four inches in length, and from an inch to two inches in breadth. The broadest part is about the situation of the nipple, of which there is not a vestige remaining. The ulcer here is a very deep excavation, as if the whole middle part of the gland had sloughed away. The edges of this extensive ulcer are ragged and irregular, in some places hanging over, and in others everted; a lurid blush of different breadths surrounds the whole of the edges, but I discover no disease in the neighboring lymphatics. The general aspect of the ulcer is of a foul ash color, except at the outer edge of the pectoral muscle, where there are a few red points. From the state of the cloths removed, the discharge from it, which is thin and pale, must be very considerable, and has the peculiar foetid odor of this kind of ulcer. The odor is distinguishable on the stair-case, long before entering the room, notwithstanding great pains have evidently been taken to obviate it. Countenance pale and bombycynous; tongue clean; pulse very little above the natural standard. Complains of restless, feverish nights. Bowels are kept regular. The old lady says the dreadful smell deprives her very much of appetite, as everything she takes is

offensive to her. Her friends were told that the case was nearly hopeless; that all that could be promised was to soothe her, and counteract the horrible fœtor, which was as distressing to her attendants as to herself. I directed the carpet to be removed, a mild diet, some common febrifuge, and the following:—

* R. Coninæ, gr. vi.

Ext. Conii, gr. xxiv. M. div.
in pilul. xij. s. pil. ij. om.
nocte.

R. Solut. Chlor. Calcis 3 ij.

Aquæ Fontanæ 3 vi. ft. Lotio.
Lint dipped in the lotion to be
applied over the ulcerated sur-
face, and to be kept constantly
moist.

8th.—Ulcer looks much the same, except at the lower side, where the lurid edge has extended every way. This portion of gland and integument is condemned. Has rested better, and is delighted that the offensive smell is removed by the use of the chlorine.

14th.—The remedies have been continued regularly. The ulcer generally looks cleaner; the edges are not so ragged, but the lower part is in a state of sphacelus, and will drop off. Complains of restless nights, but is not feverish. A moderate opiate substituted for the conium at night.

22d.—Ulcer looks much cleaner everywhere, except at the lower side; red, healthy granulations in various places, particularly in the axilla, where there is a patch of healthy-looking surface. Sleeps pretty well, and takes sufficient food.

July 2d.—Up to this time the

* How is this prepared?—E. G.

appearance of the ulcer has gone on gradually improving. A small cicatrix has formed in the axilla, and at the edge of the pectoral muscle; the upper edge is much flattened, and the lurid redness has nearly disappeared at that part; throughout, good granulations are arising, except at the lower side, where the gland and integument, nearly an inch in depth, and of considerable extent, are gangrenous; but there is a line of separation formed, which looks pretty healthy. Eats and sleeps well. Opiate continued at night, and the following ordered to be taken in the day:—

R. Tinct. Coninæ ʒiss.*

Aquæ Menthæ ʒvi. s. 6 part.
ter die.

6th.—The mortified portion on the lower side has principally dropped off, leaving a deep and foul excavation, but the corresponding edge of the integument looks healthy. Cicatrization going on from the outer edge all round the upper and inner sides of the ulcer. Sleeps well; general health and appearance improving.

14th.—The whole of the blackened parts are removed, and healthy granulations are now fast filling up the cavity, the lower edge approximating them being much flattened. In every other part of the ulcer, cicatrization is proceeding rapidly.

Aug. 4th.—In a few days after the last report, the inferior edge of the ulcer, and the granulations from its base, approximated, and cicatrization went on rapidly all around. There is now only an ulcer, about the size of a half-

crown, in the middle. The general health and appearance are much improved; walks from room to room, and is free from complaint, except a little dyspnœa, which she says has come on the last two or three nights, upon lying down. It was my intention to establish an issue, provided the ulcer went on healing, before complete cicatrization took place; and, upon inquiry, I learnt that she had an issue made about "a certain age," which she healed up many years ago. For the relief of the dyspnœa, a blister was put upon the left side of the chest, and an issue placed in the right arm. Omit the opiate, and continue the conine.

13th.—By these means the dyspnœa was removed in two or three days. The ulcer is now entirely healed, and the cicatrix has a healthy, natural appearance, free from crust or deposition. The old lady seems in good health for her years,—having entered her eighty-second year about a month ago. Throughout the whole of the process of sloughing, the lotion prevented all fœtor, and, as it gave not the slightest pain, was continued until the whole was cicatrized.

Several times during the cure, a slight erythema appeared upon the surrounding sound skin, which was always speedily checked by the application of warm brandy.—*London Medical Gazette.*

VI.

STRANGURY.

DR. JOHN DAVY, of Zante, recommends a small catheter to be introduced into the bladder in cases of strangury from blister plaster, or from canthari-

* The tincture we use contains four grains to one drachm of spirit.