

rewarded with the fairest of womankind ; but, gentlemen, were I twenty years younger, I could scarcely refrain from maintaining that no one may hereafter put in a more righteous claim to the possession of one of the most beautiful of these works in clay—the vases of the species—than the man whose judgment and labour shall in future bring to their last perfection the operations of abdominal surgery. Should this suggestion be hereafter adopted, I should be very happy to give judgment on the occasion ; and you, I suppose, would all of you be eager enough to contend with each other for the prize.

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## FOREIGN DEPARTMENT.

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PERFORATION OF THE ŒSOPHAGUS FROM AN EAR OF RYE HAVING BEEN SWALLOWED.—SYMPTOMS OF PULMONARY PHTHISIS FROM THE SAME ACCIDENT.

AN infant, a year old, having swallowed an ear of rye, was immediately seized with suffocation and convulsions, which, however, gradually disappeared. On the third day, a dose of ipecacuanha having been administered, a continued cough came on, accompanied by cold sweats. On the tenth day after the accident, an abscess formed between the third and fourth false ribs, from which the ear of rye was protruded, and this having been extracted, all the symptoms disappeared. It is very probable, that the foreign body did not enter the trachea, but, having penetrated the œsophagus, made its way through the posterior mediastinum and intercostal muscles.

In another case, where the same accident happened to a child eleven years of age, violent continued cough, and suffocating attacks, were the immediate consequence. These symptoms soon went off, but within a short time the child exhibited all the signs of phthisis pulmonalis, and was, about six months after the accident, given up by several practitioners. This hopeless state having continued for more than a year, and the patient being evidently on the eve of dissolution, a violent fit of coughing came on, by which the foreign body, surrounded by mucus and puriform matter, was expectorated ; its discharge was followed by remission, and eventual disappearance of all the symptoms ; the patient recovered, and up to the time of the report, twelve years after the accident, enjoyed excellent health.—*Compte rendu des Trav. de la Soc. de Méd. de Lyon.*

DESCRIPTION OF THE AURICULAR GANGLION.\*

By Dr. ARNOLD, of Heidelberg.

THE attention of several continental anatomists has lately been drawn to the communication which exists between the fifth pair, sympathetic nerve, and the organs of the senses. Dr. Arnold's discovery of the auricular ganglion forms an important part of these researches, the result of which will be read with interest. In man, the auricular ganglion is situated on the internal surface of the third branch of the 5th pair, immediately below the foramen ovale, at the origin of the masseteric, buccinator, and deep temporal nerves, and above the superficial temporal nerve. Its internal surface is covered by the cartilaginous portion of the eustachian tube, and by the upper part of the circumflexus palati muscle ; the middle meningeal artery is immediately behind it ; it is of an oval form, and slightly compressed ; its antero-posterior diameter varies from two lines to two and a half ; its perpendicular, from one and a half to two ; and its transverse diameter from a quarter to half a line. It is of a greyish red colour, and very delicate, soft consistence ; in the calf, on the contrary, it is grey, and rather dense, the reverse of the spheno-palatine ganglion ; a difference which, in a physiological point of view, seems to be of peculiar interest, as these ganglia, apparently, perform analagous functions.

The auricular ganglion is enveloped by a very thin and delicate membrane, which is closely attached to the nervous substance, and which, exteriorly, is surrounded by a reddish cellular tissue, similar to the cellular membrane of the intervertebral ganglion. The pulpy mass of the ganglion itself being very vascular, is traversed by numerous white filaments, of which the greater part coalesce, though not so intimately as in the ganglia of the sympathetic nerve. These filaments are branches of the inferior maxillary nerve, and of a nerve which originates from the ganglion petrosum. A great number of short filaments, originating from the third branch of the fifth pair, connect the ganglion with the latter, and thus correspond with the roots of the ophthalmic ganglion. The vidian nerve, which at first sight appears to originate from the ganglion, runs through it, after having received a slight increase of size. Another very remarkable communication exists between the ganglion and the glosso-pharyn-

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\* UEBER DEN OHRKNOTEN; von Dr. FR. ARNOLD, *Prosector an der Universität zu HEIDELBERG*; 1828. In 4to; and DE PARTE CEPHALICA NERVI TRISPLANCHNI OL. DISSECT. INAUG.

geal nerve, by means of a branch of the ramus jacobii, and another between it and the portio mollis, by means of a branch of the portio dura. The auricular ganglion gives origin to several nervous branches of a very delicate pulpy structure, and reddish colour. The most important of these arises at its upper and posterior part, and, in its course along the inner side of the middle meningeal artery, enters into that portion of the eustachian tube which contains the tensor tympani muscle, in the substance of which it terminates. Two or three branches originate from the lower posterior portion of the ganglion, and unite with the two roots of the superficial temporal nerve, very likely with that portion which sends branches to the membrana tympani.

There are consequently, the author observes, four ganglia which belong exclusively to the organs of the senses; the ophthalmic, auricular, spheno-palatine (nasal), and maxillary (lingual) ganglion, all of which are connected with the sympathetic nerve, the fifth pair, a sensitive nerve, and a nerve of motion; communicating branches of the spheno-palatine ganglion with a motory nerve, and that of the auricular ganglion with the sympathetic, have not as yet been discovered in man; in the calf the author has frequently found them.

As to the auricular ganglion in animals, Dr. Arnold has been able to find it in quadrupeds only. In carnivorous quadrupeds, it has a more superficial connexion with the fifth pair than in man, and is not crossed by the vidian nerve, of which it receives only a small branch.

In the rodentia there are two auricular ganglia, the anterior of which is united with the masseteric and vidian; the posterior with the superficial temporal nerve; both ganglia are of considerable size.

In ruminants it is much larger, and of greater density than in man; its connexion with the masseteric nerve is very intimate; that with the temporal nerve very slight.

In pachydermata the ganglion is divided into two masses, which are united by an intermediate portion; its structure is very analogous to that in the human subject.

In solipedes it is larger than in any of the other animals, and like that of the pachydermata and ruminants, divided into two portions.

In birds and reptiles, Dr. Arnold has not been able to find it, or any muscle analogous to the sensor tympani of man and quadrupeds; which latter assertion, being in opposition to the researches of Scarpa and Cuvier, wants further confirmation.

As to the function of the auricular ganglion, Dr. Arnold is of opinion, that the analogy between the membrana tympani and the fins, best serves to explain it. Ac-

ording to this view, he assigns to the auricular ganglion the same function relative to the organ of hearing, as the ophthalmic performs with regard to the eye, viz., that of regulating the involuntary motions of the membrana tympani. In the latter, two different kinds of motions must be distinguished; the one, which is entirely mechanical depends on the vibrations of the air; the other is produced by its muscular apparatus and consists in a greater or less tension, according to the degree of force with which the vibrations of the air act on the portio mollis the excitement of which is, by its communicating branch, conveyed to the portio dura and thence through the above-described branch to the auricular ganglion and the tensor tympani.

Considering the striking correspondence which, in an anatomical point of view, exists between the nerves of the organs of seeing and hearing, and those of taste and smell it might be asked, whether the latter possess also any apparatus for controlling the excessive action of external agencies? To this the author answers in the affirmative and ascribes the above function to the diaphragm, for the organ of smelling, and the excretory duct of the submaxillary gland for the organ of taste. Whenever the pituitary membrane of the nose is acted upon very strongly, sneezing is excited by the influence which the spheno-palatine ganglion exercises over the diaphragm, by means of the deep vidian nerve; in an analogous manner the secretion and excretion of the saliva in the submaxillary gland, augmented by means of the maxillary ganglion, whenever the lingual branch of the fifth pair is over-excited.

#### ANIMAL MAGNETISM.

In the sitting of the Académie Royale de Médecine on the 16th of April last, M. Jules Cloquet made the following statement:

On the 8th of April, he had been consulted by a lady 64 years of age, who had an ulcerated cancer of the right breast, with painful swelling of the neighbouring part and the axillary glands; he decided upon the operation, but as the general health of the patient gave but little hope of success he previously took the advice of some other practitioners, amongst whom was M. Chérelain, (the regular medical attendant of the lady,) who very strongly recommended the operation. This was, however, constantly objected to by the patient herself, who was of a nervous and irritable temperamer-

\* Fel. Savart has first clearly shown the existence of this kind of motion in the membrana tympani, and demonstrated the accidental reasons of it.

She was very susceptible of the action of animal magnetism, to the influence of which, M. Chapelain, one of the great magnetisers of the day, had often submitted her. This gentleman proposed that M. Cloquet should perform the operation while the patient was in the state of somnambulism, during which, sensibility being completely suspended, she would neither suffer any pain, nor show any aversion to it. To this proposal M. Cloquet saw no objection, and Sunday the 12th of April, was fixed for the day of the operation. For two days previously, M. Chapelain several times somnambulised the lady, and, by the influence of his will, disposed her to the operation, the mere idea of which she dreaded when awake.

On the appointed day, M. Cloquet found her on an arm-chair, in the posture of a person who is in tranquil sleep, and, after the necessary preparation, performed the operation in about twelve minutes, in the usual manner. During it, the patient did not evince the least sign of pain, neither by the countenance, nor by any muscular motion. She constantly remained in the same passive state in which the operator found her on his arrival; and the assistant, who kept the arms in the necessary position, did not experience the least resistance; and, wonderful to relate, when the wound was cleaned with a sponge, the patient appeared to feel as if she were tickled, and said several times, in a cheerful tone, "Have done; don't tickle me! (*Finissez, ne me chatouillez pas.*)"

The wound having been dressed, she was carried to her bed still in a state of somnambulism, in which she was suffered to remain for forty-eight hours. On the 14th, the dressing was removed for the first time; during this operation, also, the patient showed no sign either of sensibility or pain. Immediately after it she awoke, without having any idea of what had happened, and when she heard it, was very strongly affected; this sensation of mind M. Chapelain immediately caused to subside, by repeating his manipulations.

On the 16th of April, the wound was dressed a third time; it had a good appearance; the patient was very composed, and there seemed to be a very fair prospect of complete success from the operation. "Such is," M. Cloquet said, "the accurate recital of the facts, of which I have been an eye-witness; and which I simply relate, without drawing any conclusions from it, either for or against animal magnetism."

M. Larrey very much doubted, that during the operation the patient had really been in a state of somnambulism. He declared her to be an impostor, who, for the sake of

money, had taken a part in the trickery of the magnetisers, and who, by the force of her will, had been able to undergo the operation, without evincing any sign of pain. He had seen many instances of apparent insensibility in persons who were no somnambulists; and he himself had performed the most painful operations on soldiers on the field of battle, who sang the hymns of Mars, and exhorted their comrades to keep up their courage; he mentioned the instance of the fanatic murderer of Kleber at Cairo, who, under the most terrible tortures, appeared insensible. He concluded by saying, that he considered it very dangerous to let the public believe it possible for a good surgeon to be the dupe of such magnetic impostors, and that he should be ashamed to see his name associated with a fact of this kind.

With respect to the insensibility to pain in several persons, M. Hervé de Cheguin observed, that females of nervous temperament, and pious disposition especially, frequently bore the most cruel operations with astonishing indifference.

M. Lisfranc related the case of a young girl on whom he had performed the extirpation of a fungus hæmatodes, and who had not exhibited the least signs of pain. With respect to animal magnetism, the fact related by M. Cloquet, appeared to him of great importance; and all judgment ought to be suspended, until further analogous observations were made.

In reply to M. Larrey, M. Cloquet said there was not the least reason to suspect the character of the patient: her rank, education, and wealth, placed her above the suspicion of assisting a fraudulent contrivance, or having been influenced by pecuniary interest. As to the instances of insensibility, mentioned by M. Larrey, he had seen many cases of a similar kind, but there was a great difference between *real* want of sensation and *apparent* insensibility, in consequence of the will, and an unusual firmness of mind. In persons gifted with the latter, he had always seen some expression of pain, though perhaps not of the common kind; singing, and an animated conversation, are generally used by them, to distract the attention as much as possible; and the complete silence of the sufferer, the state of the countenance, muscular contraction of the hands, &c., always betray the real condition.—*La Clinique et La Lancette Française.*