PUNCTURES IN ANASARCA AND ASCITES.

BY EDWARD JENNER COXE, M.D., VISITING PHYSICIAN, CHARITY HOSPITAL,
NEW ORLEANS.

[Communicated for the Boston Medical and Surgical Journal.]

MESSRS. EDITORS,—In a former communication to your pages I detailed the particulars of the benefit resulting from a few punctures in the legs, with a lancet, in a case of ascites and anasarca, developed during the progress of a case of confirmed phthisis, attended by unusually severe symptoms, and, contrary to any reasonable ground of hope, terminating in recovery, which has continued. During the past two years, in the wards of the Charity Hospital under my charge, several cases of anasarca and ascites, of different degrees of severity, and resulting from different diseases, have presented themselves, in all of which, by means of a few punctures, all of the fluid has been discharged, gradually, but continuously, without in one instance the occurrence of any unpleasant symptom, and to the clearly felt and expressed comfort of the patient. Not knowing whether this trivial operation—for such an object—is of common occurrence, but judging it is not, from not seeing it noticed in the journals I take, it is fair to presume that these remarks may prove neither uninteresting nor practically valueless. In most of the cases of consumption in which one or both of these conditions existed, my object was, not to indulge the vain hope of an impossible recovery, but to afford that relief which even in desperate cases can be procured, with which, in the treatment of consumption, all must know that our profession is unfortunately forced to be satisfied with. The more general diffusion of the possibility of affording relief in cases where recovery dare not be expected, may possibly be the means of benefiting others similarly situated. There are cases, however, of anasarca, the result of other diseases, in which the relief from so great an evil does give additional power to the recuperative efforts of nature, and the conjoined medicinal treatment, in the efforts to effect a cure.

In a recent case of consumption, presenting all the physical signs and constitutional symptoms clearly marked, and precluding any rational hope of more than palliation, the legs and part of the thighs were so largely increased in size as to prevent the patient getting out of bed to take exercise, which, as far as possible, I encourage or insist on. In this case two small punctures in each leg, and one on the side of each foot, so entirely evacuated, in the course of a week, all of the fluid, that he was enabled to move about a little, and, as he said, to feel more comfortable.

Another case, of an entirely different character, occurred recently in a boy of 8 years, brought into Ward 32, apparently for the sole purpose of dying, it being at once predicted that he could not recover. When brought in, he was perfectly ex-sanguinous.

pulse scarcely perceptible, the skin cool, of a dirty-white color, and the lips of a death-like hue. Without fatiguing with a detail of the course pursued, I will merely state that several warm salt water baths, mild remedies to correct derangement of the bowels, wine whey, milk punch, and such tonics as I supposed adapted to the case, were given, and three times daily gentle friction of the whole body and limbs, with the following: a drachm and a half of quinine, a small quantity of diluted sulphuric acid, three ounces of cod-liver oil, one ounce of camphorated oil, and half an ounce of laudanum. The boy improved, to the point of being able to take and digest more nourishment, and also to bear well small doses of the syrup of iodide of iron, syrup of tolu, and iodide of potash. When admitted, there were slight evidences of ascites and anasarca, which slowly increased, and at last became very large, the scrotum being about half the size of his head, and perfectly diaphanous. So painful was one leg, that I was forced to use a strong preparation of the extract of belladonna and sweet oil with which to bathe the part, and also to have it enveloped in rags soaked in it. At last I decided on making *one* puncture with a lancet on the side of one foot, and one on the same leg about two inches above the ankle. The fluid at once began to flow, and continued to do so slowly for about a week, when almost every particle of fluid was discharged, and the scrotum had become as flaccid as a rag. There was no question of the benefit received, there was no appearance of an increased prostration of strength in consequence of the loss of the fluid, and yet, in spite of every exertion and good nursing, he died on the 4th of November, having entered the 26th of September.

MALIGNANT PUSTULE.

[Communicated for the Boston Medical and Surgical Journal.]

F. C., a healthy and robust youth, a farmer by occupation, 19 yrs. old, on Thursday, Sept. 29th, noticed on the left side of his upper lip, a small pimple. The lip soon began to swell, and became red. No pain, but a feeling of numbness was complained of. The following Monday he consulted a physician, who, regarding it as only a boil, prescribed accordingly. The patient grew worse so rapidly next day, that Dr. Boutelle of this place was called in consultation. Struck with the unusual appearance which the disease presented, he desired me to see the patient with him.

At this stage, the lip was very much indurated around where the pimple or pustule had first appeared, and it was swollen to more than double its natural thickness. In the centre there was a considerable depression, as if it had been scooped out, covered over with a very dark-looking scab, from beneath which there issued a thin, ichorous discharge. Encircling it, and upon an indu-