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IRRITABLE ULCERS—THEIR PECULIARITIES AND TREATMENT.

FROM A LECTURE BY GEO. CRITCHETT, ESQ., ASSIST. SURG. TO THE LONDON HOSPITAL.

I HAVE now a few remarks to offer you on the subject of irritable ulcers. I have given them a separate notice, because they present some marked peculiarities, and require some important modification of treatment. They are most distressing to the sufferer, and resist all the ordinary methods of treatment, and therefore deserve our best consideration. The irritable sore is usually small and superficial; it is most commonly found in females, usually situated about the ankle, and sometimes, but not invariably, complicated with varicose veins. The surrounding parts look of a somewhat deeper-red color, but the indications of inflammatory action are slight, and bear no comparison whatever with the excessive pain complained of; herein lies the grand distinguishing characteristic of this particular form of ulcer—that the appearance and symptoms give no adequate suggestion of the extreme amount of tenderness and suffering experienced by the patient. The sore itself looks patchy, with bright-red spots mixed with yellow; the surface is glazed, and the discharge thin; the edges are irregular and undefined. This is the more common appearance, but I have met with some sores with a tolerably healthy aspect, and yet extremely irritable. I used formerly to be much embarrassed with these cases, but experience has, I think, taught me a method by which they are to be controlled; and I shall endeavor to explain my mode of treatment by relating to you some of the particulars of a somewhat remarkable case, from which I first caught my present views respecting what I believe to be the most successful way of curing this affection. Some years ago, I was sent for to see a female between 50 and 60 years of age, residing in the neighborhood of Spitalfields. She was the wife of a clerk at the Docks, and had been accustomed to a regular allowance of beer and spirits, though never to the extent of producing intoxication. On entering, I found her pacing the room, apparently in great agony. I have seldom seen a countenance that exhibited greater irritability and suffering, and I was told by her daughter that she spent a considerable part both of the day and night in this way. She pointed out to me, as the cause of all her anguish, a superficial ulcer, about the size of a shilling, situated on the tibia, just above the inner malleolus; it looked rather angry, and there was slight sur-

rounding redness ; there was no thickening in the vicinity, or any general swelling of the limb, though the great saphena vein was somewhat enlarged. The ulcer had existed much in the same state for about six months, the pain occasionally remitting, and then returning with increased violence. Her general symptoms indicated great irritability of system ; the pulse was weak and quick, the tongue was foul and tremulous, and there was a well-marked gouty diathesis. During this time she had applied to three or four medical men in succession, and had of course tried a great variety of local and constitutional remedies, but without obtaining any relief. She was of a very impatient temper, and positively refused to take any more medicine, but expressed her determination to lose the limb if the pain did not abate. I wished to apply the nitrate of silver, but she told me it very much increased her suffering at the time, without any subsequent benefit. I had so often healed such much more formidable wounds that I did not anticipate much difficulty in this case, and I felt sure, if I could only close the sore, all pain would cease ; I found that strapping had been applied, but it had only aggravated every symptom. This had so often occurred to me before, in practice, that I determined to support the limb in my usual way, and as all the symptoms, according to my former experience, indicated that this should be done lightly, and as the wound was so exquisitely tender that she could hardly bear me to touch it, I proceeded to envelope the entire limb as gently as possible in strapping. I persevered in this plan for about three weeks, but without the slightest benefit ; indeed, with increase of the painful symptoms. At the end of this time, finding I had been anticipated in every other remedy, I determined to give the plan that had so often stood me in good stead, in what appeared to be far worse wounds, one more trial, and at least make some impression on the case, be it for better or worse ; therefore, although the sore looked angry, and was situated on the bone, although there was no perceptible swelling, and the surrounding parts were of a bright-red color, and everything seemed to contra-indicate firm support, yet, as a *dernier resort*, I applied the strapping as tightly as my muscular power enabled me. I may almost say, that from that hour all pain ceased, and at the end of a fortnight the sore was perfectly healed, and I have reason to believe has remained well ever since. It was remarkable in this case how much the irritability of system subsided with the relief of the local disease.

I have met with many other cases of this type, and I have uniformly succeeded in relieving them in the same way. A very well-marked case of the same kind occurred at the Hospital a few months ago : the patient was a middle-aged female ; the sore was small, situated over the inner malleolus, and complicated with varicose veins ; the pain was intense, and aggravated by rest, being always much worse during the night. I directed caustic to be applied, and the leg to be strapped as tightly as possible. This was continued for some weeks without amendment, and she begged me to try some other plan, as she was nearly worn out. I was so convinced that this was a case that was only to be relieved in

this way, that I took it in hand myself, in order to give the very tight strapping a thorough trial, knowing that it is only after long practice, and under the conviction of the necessity of using great force, that a requisite amount of tightness is obtained. I strained the plaster in this way with all my strength, causing the woman to cry out as it passed over the wound. But it was her last cry of pain; her next was, that I would repeat the application; and in a very short time she was quite well. Nitrate of silver is sometimes a useful adjunct in allaying the irritability, but occasionally it cannot be borne. I have met with some of these cases in which the pain has continued in a somewhat mitigated degree until the sore was quite healed; you must therefore persevere in all cases where you find the sore diminishing, even though the pain may still remain, bearing in mind that as soon as the ulcer is cured, all suffering is at an end.

I feel, then, that I am justified, from the above cases, and others of a similar kind that have come under my notice, in forming the conclusion, that whenever irritability is the leading symptom, not being attended with a proportionate amount of acute inflammation, a degree of tightness that almost under any other circumstances would be most injurious, is not only easily borne, but is absolutely required for the cure of the case.—*London Lancet.*

INFLUENCE OF QUACKERY ON HEALTH, MORALS, &c.

[Communicated for the Boston Medical and Surgical Journal.]

Remarks of Mr. Sanborn, of Hanover, in the N. H. Legislature, upon the Bill incorporating the New Hampshire Medical Botanic Society.

WHEN the Portuguese navigators first doubled the Cape of Good Hope, in the 15th century, and coasted along the shores of southern India, the evidences of wealth and refinement which everywhere met the eye inclined them to believe that they had discovered a *christian* instead of a *heathen* country. The crew of the first ship that landed upon that coast visited a heathen temple. At its entrance, they were met by priests, wearing beads, resembling the Catholic rosary, and holding in their hands vessels of holy water, which they sprinkled upon those who entered. Within the temple, they discovered numerous images, which they took to be those of saints. This completed the illusion, and they all prostrated themselves in an act of solemn devotion. But one sailor, being a little more considerate than the rest, before saying his prayers, raised himself to survey the interior of the temple, and observing that the images were grotesque and unsightly, having divers supernumerary hands and feet and other appurtenances not strictly human, he put in the following caveat before proceeding with his devotions:—"If these be devils, it is God that I worship." I must confess that I approach this new temple of science which this bill proposes to rear, with similar