Committee to the various hospitals of the country, and in particular spoke of some of the new hospitals of New York city.

Drs. Tewksbury made a report on a case of vesico-vaginal lithotomy in a little girl 7 years old. The stone was the size of an English walnut, and was removed by incision in the vesico-vaginal septum one and one-fourth inches in length. It was immediately closed by six silver sutures, and the patient fully recovered in fifteen days. Dr. Tewksbury made some remarks on the history of the operation, and in closing said, "that after a careful search in medical literature this was, so far as he could discover, the first case of vesico-vaginal lithotomy in a girl of this age followed by immediate closure of the wound."

At 8, P.M., the Association assembled at Fluent's Hall, with their ladies, and listened to an illustrated lecture on Embryology by Prof. E. P. Morse, of Massachusetts. After the conclusion, all adjourned to the Falmouth Hotel and enjoyed the hospitality of the Portland physicians.

THIRD DAY.—The closing session was called to order on the third day by the President, at 9, A.M.

Dr. Weston, of Bangor, of the Committee on Necrology, reported that the following members of the Association have died during the year:—Drs. Wm. Kilbourne, Lewiston; M. N. Ludwig and Sam'l Rose, Thomaston; Calvin Blake, Hartland; Henry Irving Jordan, Portland; J. W. Houghton, Casco; D. W. Chamberlain, Richmond; H. D. Irish, Turner; B. Porter, Waterville; T. G. Stockbridge, Bath; A. F. Blount, Bangor.

Dr. Weston, Chairman of the Committee on Prevailing Diseases, presented reports from various Counties, which were referred.

Dr. Seavey, of Farmington, reported a case of rupture of an aneurism of the aorta, and presented the pathological specimen.

Some business proceedings then ensued. Prof. Cyrus F. Brackett, of Bowdoin College, was appointed orator for the next year.

The report of Dr. Gerrish, of Portland, on the Microscope in Medicine, was referred to the Committee on Publication.

The Association then listened with great interest to some words very fitly spoken by Dr. Dole, of Amherst, Mass., delegate from the Massachusetts Medical Society. After this the Association adjourned *sine die*.

Selected Papers.

PREGNANT SICKNESS.

By METCALFE JOHNSON, M.R.C.S.E., Lancaster, Eng

IN considering the effects of remedies upon the human body, the possibility of error in some form or another presents itself so frequently as to induce great hesitation to accept coincident results as necessary consequences. There are, however, some drugs, such as opium, whose effect in sleep is seldom doubted. The point to which I desire to direct attention is one which is beset with difficulties. My object now in writing is to invite consideration for the phosphate of lime as a means of relieving the sickness consequent on the pregnant condition. But when we consider the double relation of mind and body, through the ganglionic nerves and the disturbed state of their functions, in all cases in which the control of the ganglionic nerves, or the great sympathetic, is interfered with by an abnormal condition of organ or organs under its especial rule, we shall see that it requires especial watchfulness to be sure that we do not mistake a "*post hoc*" for a "*propter hoc*" in those instances where relief of symptoms has followed the exhibition of the remedy. Before proceeding to remark on the theory of *modus operandi*, &c., the simple use of the drug may be described. For some years past I have been in the habit of prescribing the simple hydrated phosphate of lime of the Pharmacopœia in doses of from three to ten grains each, three times a day, suspended in water, and flavored according to the taste of the patient. I have tried the remedy dissolved in hydrochloric acid, as also the powder in the dry state, besides having had it made up into biscuits; but in none of these forms have the same agreeable results followed so frequently as when the simple hydrated phosphate has been used suspended in water.

One remark may here be made respecting disorders of the great sympathetic and its subjected organs, that they are generally characterized by a dislike of all sweet flavors. This has been noticed in the case of persons whose ganglionic system is disordered through the stomach by the abuse of alcohol; for I think it is Coleridge who says there is always hope for a man so long as he is fond of his pudding. But in those other forms of female ganglionism which, for want of a proper diagnosis, we design-

nate under the generic term hysteria (though in many cases the uterus has nothing to do with it), the taste not only has an aversion to sweet things, but has, apparently, a depraved tolerance of the flavor of fetid preparations and the alkalies, together with an ability to receive the stimulus of both alcohol and the carminatives, such as lavender, ammonia, cardamoms, &c., with advantage. The relation of this sympathetic nerve to certain conditions of the circulation is a subject worthy of more attention than it has at present received; more especially since the *Saturday Review* has, with a one-sided view of the matter, taken up such a raid against "alcoholism."

With these complex considerations we approach the subject of pregnant sickness or vomiting. Here we have, of course, an enlarged uterus, which physically bears a relation to the various organs of the body, such as the stomach, large and small intestines, liver, gall-bladder, kidneys, &c., different from that in health, pressing upon each, and producing a state of things with reference to each organ which, if brought about by traumatic means, would in any case bring on nausea and vomiting. But, in addition to this, the very relation to the nerve is altered, and in many cases this great change is attended with not only bodily suffering but temporary mental aberration. I have not unfrequently seen temporary insanity of a few hours' duration attend both the act of conception and the act of quickening. Everyone is of course familiar with the puerperal insanity as well as the frequent insanity which is associated more or less directly with ovarian or uterine disease.

A short time since, Mrs. A. B., aged 24, second pregnancy, during the last month has had violent spasms all over the body, with strabismus. Mouth and hands clenched. Says she has pain all through the womb. Has great sensibility in the nipples and the breast. Bowels generally confined. Has had bleeding at the nose for the last few days. Her mother is a very excitable, clever woman, and one other close relative a somnambulist. The spasm was relieved by subcutaneous injection of morphia. I emptied the bowels by an aloetic enema, and gave her the phosphate of lime, which she took for three weeks, after which she was delivered of a very small child, the parietal bones of whose head consisted simply of two centres of ossification. Since her confinement she has been well. The spasm never returned after using the phosphates. I have often had this proof of the efficacy

of the phosphates in arresting the sickness: that patients have been sent to me for "some of that medicine that relieves the sickness."

I had a patient a few weeks ago, who had been complaining for some weeks of an irresistible vomiting after every meal, who no sooner took the phosphates than all sickness ceased. This of course might be the effect of expecting to be relieved; but the cases have occurred too frequently for me to think other than that relief has been most frequently the result of the use of the phosphates. As such, I trust that some of your readers will be induced to give the remedy a trial, for which I now proceed to give a physiological reason or *ratio medendi*.

As we have seen, the altered shape of the uterus, the altered nerve relations, the control of the ganglionic nerve to supply the new arterial system to be established, make a demand upon nervous influence which is very unusual. Nervous power cannot be expended without harm, unless the supply of new neuric elements makes up the deficiency. Neuric force derives much of its nutrition and source from phosphates. Moreover, the child in its formation requires more phosphates for its new bones, and if these are supplied at the expense of brain and ganglionic nerve, it follows, as a matter of course, that debility, nervousness, and all the concurrent train of symptoms must inevitably be brought about; and hence arise those feelings of depression, peevishness and irritability so frequently associated with the pregnant state. Nor is it to be wondered at, if we consider that we take no steps to supply the new demand made upon the blood.

This view of the case is again supported by pathological evidence, when we see how that fractures in pregnant females are more frequently liable to non-union. These considerations induce me to believe that the remedy is really the cause of the relief so constantly expressed by the patient after its use for a few days. I have also for some years been in the habit of using this form of phosphates for the relief of rickety children with great success, which further confirms me in the belief that phosphates administered through the stomach do become used by the blood. I have used for children the saccharated wheat phosphates supplied by the druggists, but in the case of pregnant females I have not found those so useful, and chiefly, I suspect, owing to the sugar which they contain.—*Med. Times and Gazette*.