office of the skin to which I have adverted, than any other part of the cutaneous organ, except it be perhaps those portions which cover the palms of the hands and the soles of the feet, and I have no doubt from what I have seen of such accidents, that death would have been the result of a burn of the same extent, if it had been on the neck, the thorax or abdomen.

On the internal use of Spirits of Turpentine in Bowel Complaints of Summer and Autumn. By J. H. FLINT, M. D.

[Communicated for the New-England Journal of Medicine and Surgery.]

FROM the effect of terebenthinates in the cure of inflammation of some of the mucous membranes, I was induced, the last year, to employ balsam. copaibæ, after evacuations, in the bowel complaints of summer and autumn—I say, after evacuations, because the general opinion I believe, is, and it was mine, that diarrhœa, dysentery and cholera are the effect of irritation, succeeded by chronic inflammation or congestion—and consequently that the early procurement of alvine evacuations was almost indispensable to their cure. It has seemed to me that sudden death in cholera of infants could not happen from the debility induced by profuse lymphatic discharges. And I have observed, too, in all cases, death has been preceded, invariably, by most unequivocal indications of oppressed brain.

When the alvine evacuations are frequent and profuse—the surface pale and cold—and the patient wearing the ‘stamp and impress’ of death, we are cautioned to avoid evacuants altogether, and instructed to rely on the administration of diffusibles, particularly opium. I am constrained to remark that under these circumstances and subjected to this treatment, in my hands, patients have rarely survived. Indeed I have thought (and I have watched my patients from the commencement of disease to the close of life) that the fatal event was accelerated by the means employed. I am now confirmed in the opinion from having discovered in cases of bowel disease, when I have been permitted to make post mortem examination, the mucous membrane, frequently of the whole track of intestines exhibiting strong marks of high inflammation. Introsusception in children—enteritis and strangulated herniæ in adults, each and all, present the most permanent symptoms of cholera of infants, and if treated with opium and other diffusibles would terminate in death preceded, I have no doubt, by congestion of the brain. The profuse lymphatic discharges in the commencement of cholera may be considered, I think, good evidence of the existence of inflam

mation, as the same symptom, (i. e.) increased aqueous secretion, characterises a catarrhal inflammation of the bronchiæ—of the mucous membrane of the urethra in gonorrhœa, &c. It is a very trite remark among nurses that copious discharges of blood from the bowels in dysentery are not so dangerous as, what they term, white dysentery or cholera,—simply, because in the former the local inflammation is relieved by the spontaneous disorgement of the intestinal vessels. It is true that inflammation of mucous membranes is not so formidable as of serous ones, nor does it require for its removal such prompt and energetic measures, but it will not be controverted that all inflammations demand in principle, a similar treatment, namely, bloodletting and the antiphlogistic course as it is called, adapted to the severity of disease and to the importance of the part or organ invaded.

On this hypothesis I have treated bowel diseases of the present season in the following manner and with most satisfactory and gratifying results.

In simple diarrhœa, without heat or pain, I give, to an adult, mucilage of gum arabic ʒss—spirit of turpentine 10 drops—to be taken, morning, noon and night.

Painful diarrhœa, and dysentery—with fever, pain and tenderness of the abdomen. I bleed to faintness—and if practicable, immerse in a bath of from 100° to 110°—then administer

Submuriate of Mercury 1 gr.

Compound powder of ipecacuan 3 grs. } incorporated

with crumb of bread and repeated every six hours. Mucilage of gum arabic with turpentine (as before) every six hours, alternating with the pills. If fever and pain continue after 24 hours, either repeat the bleeding or apply leeches to the abdomen and continue the medicines.

In cholera of infants, I pursue substantially the above course, and I am not deterred from abstracting blood by seemingly forbidding symptoms. If there be much apparent languor with pale and cold skin, I first immerse in hot bath and then apply leeches to the abdomen, and give, to a child under two years, instead of the submuriate of mercury

Quicksilver pill

Compound powder of Ipecacuan } 2 grains

in simple syrup, every six hours. Mucilage of gum arabic with turpentine ʒii. every six hours, alternately.

It will appear quite obvious that this outline does not embrace all the means necessary to the cure of disease, neither must it be understood that the medicines are to be administered with mathematical precision.—They must be varied in quantity and time—and suited to the age, habit and circumstances of the sick.

In the first, or what I consider the stage of inflammation, the patient should be kept in bed—warmth on the surface promoted by draughts of warm water or herb tea—by dry rubbing or brushing.

Food and cordials to be interdicted absolutely.

In the second stage, on the abatement of inflammation, which will be known by diminution of pain and tenderness, and a restoration of comparatively healthy peristaltic action, if evacuants are required, I prefer sulphate of magnesia in infusion of sena and annis seeds for a cathartic, and if an emetic be indicated, ipecacuanha—and, finally, to remove chronic diarrhœa which frequently follows a severe disease, I order the mucilage and turpentine to be taken two or three times in the day, adding to it, occasionally, a few drops of the tincture of opium, with daily use of flesh-brush, bland and regular diet.

I may be permitted to make a few remarks on some of the popular modes of treating bowel diseases which have fallen under my own notice—and first, of stimulants, viz : rum, brandy, spices and opium.

I cannot refrain from expressing my thorough conviction that no one ever recovered under this treatment who was not solely indebted to the powers of a good constitution resisting disease, and triumphing over an abuse of the worst means.

Opposed to the stimulant plan, is the soothing practice of giving mucilages, castor oil, manna, magnesia, &c. and the patient is constantly teased with mucilaginous enemas to sheathe the bowels and supply the place of natural mucus.

Recoveries, under this management, are, to be sure, not unfrequent, but I am persuaded in all cases, the restoration would have been much more speedy but for this officious interference.

But a more common method is to evacuate with antimonial emetics and drastic cathartics—Jalap or rhubarb, or resinous cathartics with calomel, 'till the heat recedes from the surface. Then opium and spirit, and bark, &c. are given 'till reaction is produced, when recurrence is had again to evacuants, and then stimulants, again and again—and the patient kept vaccillating between life and death, until the system, with most wonderful pliancy, becomes accustomed to the impression of the means employed, and after weeks of severest suffering, slowly recovers.

If there be one cathartic medicine of the whole tribe of cathartics, more deleterious than any other, employed early in dysentery, it is rhubarb. I have, in more than one instance, known inflammation of the mucous membrane of the bowels assuming all the symptoms of severe dysentery, induced by the pernicious

habit which some invalids and sedentary ones have, of chewing daily the root of rhubarb to obviate habitual costiveness. And yet this medicine is considered by some quite a specific in dysentery! If it can ever be used with advantage, and I will add, with safety, it is in the last or lienteric stage of bowel complaints; and even then I think the turpentine incomparably better.

Now I would ask, does not all this discrepancy and contradiction and confusion in the treatment of bowel complaints result from a misapprehension of their true character? Of the practice I have presumed to recommend, I can say, that it has been successful much beyond any I have before adopted—and, in conclusion, I will hazard the conjecture, that terebinthines will yet hold a rank in the cure of many diseases second only to mercurials.

NOTE.

There is a precursory state of indisposition indicated, in adults, by inappetency, listlessness and wandering pain, when the abstraction of blood and a full dose of submuriate of mercury followed by a saline cathartic, with rigorous attention to diet afterward, will arrest disease. It may be detected in children by peevishness, fretfulness, drowsiness and disturbed sleep. Ipecacuanha and submuriate of mercury assisted by a saline purge will generally prevent the impending disturbance of bowels.

When, however, local determination has become local inflammation, and the functions of the stomach and bowels are interrupted or suspended, disease may be said to be fully formed. No time then should be lost in fruitless attempts to procure evacuations by emetics and cathartics. It is a moment as precious as life is dear.

It will be noticed that I use the common spirit of turpentine. From repeated experiments I am satisfied that turpentine has more power than balsam. copaibæ and sits more pleasantly on the stomach—and it can always be obtained comparatively fresh and pure.

The preparation is rendered less disagreeable by adding to the mucilage of gum arabic, refined sugar, and a few drops of aromatic essential oil.

R. Mucil. Mimos. Nilot	℥ 3.
Ol. Vol. Pini Pur.	3 ii.
Sachar. Alb.	36.
Ol. Vol. Caryoph.	℥ 6.
Aquæ.	℥ 3.

Let the turpentine, oil of cloves and mucilage be well agitated and the water and sugar gradually added.

Spirits of Turpentine in Chronic affections of the digestive organs.

Since the invaluable writings of Messrs. Abernethy, Ayre, Hall and others, and more recently of Philip on Indigestion, the ancient mode of treating this sombre catalogue of diseases of a thousand names, with savoury food and brandy bitters under the insidious name of stomachics, has given place to a rational and successful practice.

Benevolence owes much to the labours of those gentlemen, and even cupidity may rejoice in the hope that the burthen of taxation will be lessened by the diminution of pauperism and crime.

In functional disorders of the digestive organs I have for some months used, in conjunction with mercurials, the spirit of turpentine in the same form in which I have prescribed it in diseases of the bowels. It supersedes, generally, the use of laxatives—promotes the secretions—determines particularly to the surface, than which nothing can be more important—and if it has not in some degree the effect of mercury, it seems to possess the power of perpetuating the peculiar action induced by it.

The subjoined cases of colica pictonum, in which the turpentine was successfully employed, were furnished me by a medical friend.

Mr H. after suffering some weeks from indisposition which he called rheumatism, the symptoms of which were—loss of appetite, lassitude, wandering pains over the whole body, pain in the lower extremities particularly aggravated at night, cold, dry and rough skin, and torpid bowels, was seized with violent pain in the umbilical region—rejection of every thing taken on the stomach, but without nausea—constipation of the bowels—pulse 55 and moderately full—the abdominal muscles permanently affected with spasm and extremely rigid.

Treatment.—Sub. m. hyd. pulv. ipecac. comp. and pil. aloet. comp. in large doses and at short intervals—Infus. sennæ. anesi. and sulph. magnes.—one full blood-letting—warm bathing—warm fomentations to the abdomen—stimulating enemata. The sub. m. hyd. was continued for 3 days when free ptyalism came on, and it was suspended. The other means were employed for two days longer and no evacuation from the bowels procured. After five days ordered ol. terebinth. and ol. ricini, equal parts—half an ounce to be given and repeated every 4 hours—in 18 hours produced two or three dejections—vomiting ceased and pain abated—Large doses of cathartics were found necessary to con-

tinue an open state of the bowels for four or five weeks when he suffered a second attack as obstinate as the first—but yielded at length to the daily use of ol. terebinth. alone. The functions of the stomach and bowels were gradually regained.

The wife and sister of Mr H. suffered from similar symptoms at the same time but they were milder and yielded readily to sub. m. hyd. opium and cathartics.

A child of Mr H.'s aged 4 years, died of the complaint at the end of five days. On dissection was found intus susceptio, at two places below the middle of the ileon, where were marks of considerable inflammation. The ileon and jejunum above the strictured part were contracted to a mere cord and very closely impacted in the left hypochondrium—neither their vessels nor those of the stomach were injected with blood.

The apple-sauce used in this family was kept in earthen pots, manufactured in this neighbourhood and glazed with a preparation of lead. Some of this sauce was washed with water and the water filtered. On adding sulphuric acid a copious ash-coloured precipitate was thrown down and this precipitate before the flame of a blowpipe directed upon charcoal produced a button of metallic lead.

J. S. aged 38, for many years a manufacturer of earthen ware, suffered from the same symptoms described in the case of Mr H. The only difference in the two cases was in duration. If, as it appears to me, it be allowable to divide this disease into two states or stages, a chronic and an acute, in the case of S. the former existed for years and the latter for many months. During his indisposition, the system was repeatedly under the influence of mercury, when the bowels were much more susceptible to the action of cathartics, but as ptyalism abated the disease returned.

The ol. terebinth. was employed and an immediate improvement of the disordered state of the bowels followed its use. It was discontinued and the complaint returned. Recourse was again had to it, and it was employed daily till health was established.

Northampton, 1823.

Case of diseased appearance in the Brain, resembling Hydatids.
By WILLIAM SWEETSER, M. D.

ON the 4th of August, 1822, I was requested to visit Mrs.—— aged 63. Her most prominent symptoms seemed to indicate disorder of the gastric organs. She complained of pain and uneasiness about their region—of costiveness, loss of appe-