times daily, generally on an empty stomach, in porter. A month had not elapsed before a marked change had taken place both in his general health and the feeling of the lungs; the soreness gradually subsided, his cough disappeared, his respiration became easy and natural, and in a little time all expectoration of purulent matter ceased, together with the periodical eruptions. The hectic and night sweats abated, sleep became natural and refreshing; the appetite returned, with a healthy state of digestion; the muscles acquired fulness, with renewed tone and activity; and, in fact, the whole system, under the continued use of the oil, seemed to be regaining its wonted state of health. And now, after a period of nearly two years, there has not been an eruption or any appearance of a renewed abscess, and all purulent expectorations have long since subsided. He told me personally the last fall that he felt perfectly well; he had no trouble from his lungs, he felt in better health and stronger than he had done for years. He had worked steadily every day, and had, during the haying season, kept up with other good mowers, and done his day's work as easily as any laborer.

The beneficial results in this case must be attributed alone to the oil, as no other medicine was made use of from the time of its commencement. He has informed me, since discontinuing the oil, that he took some twelve bottles in all, holding a pint each. The question may justly arise in this case, whether the abscesses that formed so often and discharged in such large quantities, were the result of long-continued tubercular deposit or the immediate effects of pneumonia or bronchial inflammation? It is my opinion that they were the result of the latter, as he had always enjoyed good health up to the commencement of this attack, which was produced by a violent catarrh.

[To be continued.]

Worcester, April 1, 1851.

A. STONE, M.D.

[THE following essay, on a subject full of interest to the anatomist, was written and first published in 1832. It is now re-printed, by request of the author, who wishes the reader to be apprised that he considers the subject very far from being exhausted—there still remaining an ample field for anatomical research. The "Supplement" was contained in the original essay.—ED.]

AN ESSAY ON THE GANGLIONIC SYSTEM OF NERVES IN THE CAVITY OF THE CRANIUM, AND ITS USE.

BY WILLIAM INGALLS, M.D.

[Communicated for the Boston Medical and Surgical Journal.]

I. The energy of the brain, and the due performance of its functions, as it has been supposed, do not depend on its volume, the size of its convolutions, nor the temperaments.

II. As in other viscera, the perfect organism of the brain is undoubtedly a condition essential to the performance of its functions with exactitude and energy; for, a malconformation, or some defect in its minute

structure, not cognizable by the senses, may render this viscus unsusceptible of impressions necessary to its healthy and vigorous action. But, a complex organ, deprived of the stimulus of nervous influence, however perfect its structure, becomes torpid, and its function destroyed.

III. From the following post-mortem examinations it may be inferred, the size of the brain, the number, depth and thickness of the convolutions, are merely conditions, but, perhaps, necessary conditions in the production of thought, and the propensities to which man is subject.

CASE 1.—In this case, the person was subject to frequent and great mental excitations. The brain was of extraordinary dimensions, and all its parts were uncommonly developed: the convolutions were large, distinct and numerous; the ganglia were readily distinguished and displayed; the medullary cords easily traced; and the pineal gland was of the pine-apple form, and so large as to attract particular attention.

The remarkable development of the brain, and the dissection taking place a few hours after death, in a subject that had died suddenly from suffocation, and the whole organ being moist with serosity, enabled me to demonstrate the minute parts with comparative ease; and led me to believe, the pineal gland and other similar bodies, the uses of which have not been explained, were destined to perform an important part in the functions of the brain.

CASE 2 was the dissection of the brain of a person, who sustained the reputation of possessing fine intellectual powers, and who had practised law with reputation and success. The brain was small, the convolutions were diminutive, comparatively indistinct, and apparently more numerous than usual.

CASE 3 was the dissection of the brain of an idiot, of very diminutive stature. In this subject, the capacity of the cranium in proportion to the size of the body was exceedingly small; the cerebrine convolutions were *few* in number, but very large and uncommonly distinct. This idiot was wholly destitute of understanding, and devoid of every propensity, good or bad. The pineal gland was converted into a substance resembling a small melanose petechia.

By the way, it may not be improper to remark, there was found in the digestive canal, a number of lumbrici of extraordinary size; several had penetrated by the *pori biliarii* into the substance of the liver; and three were closely impacted into the common biliary duct, by which it was greatly enlarged, both in diameter and length.

CASE 4 was the brain of a man possessing a degree of intelligence, but was so much of an idiot, he was incapable of providing for his physical wants; and, on this account, he was placed under the superintendence of a brother. The brain was large, and all its parts fully developed. The pineal gland was of the pine-apple form, cartilaginous, and larger than usual.

In this individual, the intellect remained unimpaired till he arrived at the age of 9 years; when, after a severe fever, ensued the mental imbecility, which continued through life. Several analogous cases occurred in the same family.

IV. In this place, it was my intention to give the anatomy of the

brain; but as hitherto the relative importance and use of parts, besides those that are now under consideration, have not been satisfactorily demonstrated, this subject will be postponed, to be resumed at some future period.

From the remarkable appearance of the pineal gland, in cases 1, 3 and 4, Section III., I was induced to examine the parts connected with this organ; and the result of my investigation will be found in the following paragraphs.

V. It is not pretended, however, because the organization of the pineal gland was in a morbid condition, it was the sole cause of idiocy in cases 3 and 4, Section III.; yet it is not unreasonable to suppose, the diseased state of this organ may have had an influence in diminishing the activity of the brain.

VI. It is thought by many to be capable of demonstration, the diseased state of the ganglia of the trisplanchnic nerve may have an important agency in impairing, disturbing, and even destroying the functions of viscera essential to life.

VII. Hence, if it be established, the glands and other bodies contained in the cavity of the cranium are found to discharge the office of ganglia, the brain will undoubtedly be liable to suffer from the disordered affections of these parts.

VIII. Glandular pinealis is for the most part of a conical form, and is situated on the back part of the posterior commissure. Its base is attached by a short slender neck to a short transverse medullary cord, which, at each of its extremities, divides into two pedunculi, the anterior and posterior. The former passes over the thalamus nervi optici near its internal margin, and finally terminates in the eminentia mammillaris. In its passage, it sends a few filaments to the optic couch, and one to the anterior crus of the fornix, just before it arrives at its ultimate destination. The latter, which is much shorter than the former, takes a direction backward, and is united with the quadrigeminal bodies.

IX. The eminentiæ mammillares are two small hemispherical bodies, situated at the base of the brain, anterior to the cribriform plate, and posterior to the junction of the optic nerve. From each of these bodies proceed three nerves, or medullary cords, an anterior, middle and posterior.

X. The first, or anterior cord, penetrates the anterior lobes of the brain, and may be traced to a considerable distance into its substance.

XI. The second, or middle cord, under the several appellations of anterior and posterior crura of the fornix and corpus fimbriatum, extends from the eminentia mammillaris to the bulb of the pes hippocampi major. This cord, having, like the nerves belonging to the ganglionic system, connection with small masses of gray substances, furnishing various organs with nervous filaments, and anastomosing with other cords, is justly entitled to the rank of a nerve.

XII. The anterior crura of the fornix go upward and backward, gradually approximating each other, till they come in contact in the anterior part of the lateral ventricles; soon after their junction they begin to diverge, and continue to diverge, assuming in their course the name

of posterior crura, until they reach the pedes hippocampi majores; when, under the name of corpora fimbriata, they follow the course of these bodies, to which they adhere almost to their termination. These cords or nerves send off fibrillæ, which, in some subjects, from their peculiar distribution on the inferior face of the fornix, have been considered not inaptly to bear a strong resemblance to the strings of a lyre. These fibrillæ supply with nervous influence the part of the corpus callosum, where this and the fornix coalesce.

XIII. The third, or posterior cord, penetrates the body of the optic couch, and ascending, till it arrives nearly to the semicircularis geminum, it soon separates into a number of filaments, which run backward parallel to the above-mentioned cord, and, finally, emerging from the optic couch, unite with the filaments of the semicircularis to form a plexus.

XIV. The tænia semicircularis geminum originates from the tuber cinereum, and anastomoses with the anterior crus of the fornix; and, receiving a branch from the anterior peduncle of the pineal gland, takes a direction backward, coursing between the thalamus nervi optici and corpus striatum, till it meets the branches of the posterior cord of the eminentia mammillaris, when, dividing into filaments, it unites with those of the former body to form a plexus.

XV. The result of the union of these two nerves, Sections XIII. and XIV., if it be allowed to call them so, is the formation of a plexus, from which filaments are distributed to the optic couch, and the flooring of the inferior horn of the lateral ventricles; some also are continued to the extremity of this sinus, and anastomose with the posterior filaments of the anterior commissure, before they disappear.

XVI. The commissura anterior is a round medullary cord, which traverses the middle lobes of the cerebral hemispheres, and terminates in a radiating lash of filaments; some extending forward as far as the fissure of Sylvius, others backward to the descending horn of the lateral ventricles; the former anastomosing with the root or origin of the olfactory nerve, the latter with the filaments proceeding from the plexus formed by the branches of the semicircularis, and the posterior cord of the eminentia mammillaris (and the corpus fimbriatum.—*Meckel*).

It is slightly *curvilinear*, with its convex part forward: a small portion of it may be seen in the third ventricle, just before the anterior crura of the fornix.

XVII. If we take a survey of the wide range which the cords or nerves, above described, perform, the mind must be convinced of the similarity existing between these and the nerves of the ganglionic system in the other cavities. In tracing the cords from ganglion to ganglion, commencing with the pineal gland, we find that the posterior peduncle is connected with the tubercula quadrigemina, and the anterior with the eminentia mammillaris; that from the eminentia mammillaris depart three medullary cords, an anterior, middle and posterior; the two latter travel backwards, the middle terminating in the corpus fimbriatum, and the posterior anastomosing with the semicircularis to form a plexus; that the branches of the anterior commissure are united with those of the above plexus and the corpus fimbriatum posteriorly, and anteriorly with

the external root or origin of the olfactory nerve; and that this nerve is connected by its internal root or origin either immediately or through the medium of the tuber cinereum with the optic nerve. To this it may be added, the anterior commissure is connected with the tuber cinereum. Hence by the agency of the above-mentioned cords and their appendages, the ganglia, a stimulus necessary to its functions is not only supplied to the brain, but a mutual relation is preserved between the peripheral and the central parts of this viscus, and the optic nerve.

XVIII. The glandula pituitaria is an isolated mass of gray substance, lodged in the sella turcica, and furnished with a neck or twig; which by Meckel is thought to be attached to the anterior commissure. In these respects, as well as in its diseases, it has a striking analogy to the pineal gland.

XIX. The tuber cinereum, viewed from the base of the brain, is of a triangular form, and situated between the junction of the optic nerves, and the mammillary eminences. It is attached by its apex, to the decussating portion of the former; but its base lies towards the latter. This mass has all the properties of a ganglion. Its thickness is very considerable, and embraces the greater part of the anterior pillars of the fornix, and the parts of the nerves that anastomose with them; viz., the anterior pedunculi of the pineal gland, and the tænia semicircularis geminum; and also a portion of the anterior cord of the eminentiæ mammillares. The infundibulum enters the inferior face of this body near its centre.

From a review of the structure, arrangement and distribution of the various organs, above described; and their being particularly adapted to accomplish the purpose for which they were evidently designed, the mind is irresistibly impelled to the conclusion, the *energy and activity* of the *brain*, like the liver, heart, and other viscera in the abdominal and thoracic cavities, must depend on a *ganglionic system of nerves*. Should this position be eventually established, it would afford a foundation for the attainment of a clearer and more precise knowledge of the physiology of the brain.

Supplement.—My opportunities for dissection being very precarious, it is impossible for me to pursue the study of the anatomy of the brain with the regularity and constancy which so complex an organ demands. This may serve as an apology for the additional description of the infundibulum and its connections.

Since the manuscript was placed in the hands of the publishers, an opportunity of dissecting the brain, and of obtaining a more precise knowledge of the relative situation of the infundibulum, the tuber cinereum and the anterior commissure, has presented itself.

The brain was placed on its vertical surface, and the optic nerves were cautiously detached from its connections from before backward, till the membrane, which closes the anterior extremity of the iter ad infundibulum, came into view. The removal of this membrane opened a free communication between the third ventricle and the surface of the brain; and, through the aperture made by the removal of the membrane, the orifice of the infundibulum was conspicuous. On folding back with pre-

caution the optic nerves, and introducing the point of the blow-pipe into the orifice of the infundibulum, its canal was inflated through its whole extent.

The border of the aperture, which was circular, and which had been closed by the above-mentioned membrane, consisted of gray substance, one portion of which was attached to the commissure above, and another was blended with the tuber cinereum below; so that the tuber and the gray substance that surrounds the aperture may be regarded as a continuous mass. In this subject, the infundibulum was not adherent to the anterior commissure, but to the tuber cinereum: hence the pituitary gland could exert no influence over this medullary cord, except through the agency of the tuber cinereum; to which body I consider the pituitary gland to be an auxiliary appendage.

TREATMENT OF SYNCOPE AFTER DELIVERY.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I take occasion to communicate a discovery, which I have made, for your valuable Journal, if it be a discovery, and you deem it worthy a place in your pages. I have mentioned it to quite a number of my medical friends, all of whom say they never saw any mention of it in any work, and never heard of it before, and they all have urged me to communicate it to you for publication to the profession. My discovery is—*compression of the abdominal aorta in cases of faintness after delivery.* Who that has long practised in this branch of our business, has not been often terrified by the sudden and unexpected occurrence of a severe fit of syncope to a patient within an hour or two after delivery, even when every human precaution has been taken? Who has not seen the lamp of life, in these circumstances, so flicker that it appeared every moment ready to go out, even while every known remedy was being employed to keep it burning? Compression of the aorta at the umbilicus (it is easily done) will immediately rally the patient. Compression may be continued till stimulants will have time to operate, and restore the necessary nervous influence, and be gradually abated as this influence is restored. It is already known that compression of the abdominal aorta is the most effectual remedy for hemorrhage after delivery. Syncope is sometimes the consequence of hemorrhage. This compression is the surest, safest and readiest remedy known for either of these difficulties, or both together. Syncope sometimes ensues when no hemorrhage or other untoward condition is present. Compression of the aorta at the umbilicus will stop the faintness, and do no evil to other conditions. Let all try it who would prevent the occurrence of those sudden deaths that we sometimes hear of as happening without any known cause. None need have any apprehensions, in trying it, of trespassing upon my private rights, for I have no idea of securing letters patent, as has been done in some other cases!

SAMUEL C. WAIT, M.D.

Gouverneur, N. Y., May 5, 1851.