I. Case of Diffuse Inflammation produced by Local Injury.

By Daniel Fisher, M.D., of Martha's Vineyard.

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The following case is of the character of those caused by wounds in dissection, and by the contact of putrid skins to an excoriated surface, and sometimes by the puncture of veins of the arm in bleeding. A great part of the serious accidents arising from these causes are to be attributed to the combined action of local injury and of causes affecting the whole body. Thus, in the case here related, had not the patient been exposed to the action of cold in such way as to produce a constitutional disturbance, it is not probable he would have suffered such very severe consequences from the local injury. In many of these instances the difficulty arises from neglect of the original injury, and sometimes from a repeated application of the irritating matter. The disorder is a dreadful one, and happy it is that it does not occur more frequently in dissection; for it would add another to the many impediments to the pursuit of a knowledge of the human structure. Wounds in dissection are rarely formidable, if the wound is immediately sucked and kept quiet till healed; the patient at the same time being careful to avoid every noxious exposure. The subject of the present case survived the disease, and recovered from an affection which would have proved mortal to one of less vigorous constitution of body and mind. The enormous quantity of opiates administered, shows the violence of the pain and the malignity of the disease. This may also, perhaps, be considered as a proper example of the treatment to be pursued; if it be noted that the disease began without violent symptoms, and therefore did not at first experience the
very active treatment such cases demand. One other remark. This patient was not relieved by warm applications, but found cold more agreeable. This is not unusual in this kind of inflammation; and the fact should lead practitioners to try such opposite applications as cold and heat in the same case; that is, when one fails, the other should be resorted to.]—Ed.

In the evening of the 24th of November, while engaged in dissection in the Medical School in Boston, I felt a dull pain in the whole extent of the left arm, with loss of its muscular strength, which continued about two hours. I was exposed to a north-east storm the same evening, and prevented from sleeping that night by accidental causes. In the morning the fauces were uncomfortable from inflammation. For some days previous to this, my hands had been exposed to the action of oxymuriate of mercury used in dissection, particularly the left hand. The solution contained 3 j. of the oxymuriate to 1 xvj. of diluted alcohol. In the morning of the 25th, observed a small vesicle on the side of the middle finger, next to the forefinger, on left hand. Also observed a vesicle on back of thumb of same hand. These vesicles were not painful, but uncomfortable on account of their smarting. On pressing them with the thumb nail, a small quantity of acid serum, of a leaden hue, was discharged. In doing this, the cuticle of vesicle on the finger was removed; vesicle continued to smart, and in afternoon was found to have obtained the size of a pea. In forenoon hands were slightly exposed to the oxymuriate; about 3 o'clock, in afternoon, hands were again exposed to the oxymuriate, (the temperature of which was between 80 and 90 degrees,) and also to the contact of purulent matter. After this exposure of hands, accidental circumstances prevented their being cleaned, until about half an hour had elapsed. At the time of last exposing hands, inflamed part was greatly irritated, and serum was observed occasionally to flow from it. After washing hands, finger became painful, and continued through night so as to prevent sleep.

Friday, 26th. Inflammation had extended to whole of parts over second bone of middle finger. Passed the forenoon in dissecting-room, which was very cold. At 1 o'clock, P. M., felt considerable depression of system and loss of muscular strength. Dr. Warren prescribed sulphate of magnesia 3 j.; white-bread and milk poultice to hand. After applying poultice pain much increased, and swelling extended the whole length of finger. In evening had four leeches to finger, with temporary relief of pain; but upon re-applying poultice, pain became as severe as ever, and continued so until poultice was withdrawn, and compresses dipped in warm water were applied to finger. Finger continued to bleed during night from application of leeches, and probably bled about 3 ii j. or iv. Slept but little during night; thirsty, but no appetite.

Saturday, 27th. Took 3 iss of sulphate of magnesia, which operated freely; then took as follows: R. Hydarg. submbr. 3 j. Pulv. opii gr. xv. M. ut ft. pilulie, numero vj.
One to be taken every two or three hours, through the day and evening. Took five pills, but pain continuing severe, slept but little during night. Applied compresses dipped in sweet oil.

Sunday, 28th. At 4 o'clock, A. M., pain became very severe, and extended up metacarpal bone. Had a poultice immediately applied, which increased pain and swelling, but poultice was kept on till half past 10, A. M., when hand was seen by Dr. Warren, who ordered copious venesection to arm, afterwards eight leeches to hand. Having much nausea, pulv. ipecac. 3 j., (previous to venesection,) which operated five times; the last time, matter ejected bitter. After taking emetic had eight leeches applied to back of hand. Afterwards venesection from left arm ad 3 xu. by measurement afterwards. Venous blood of arm very red, nearly the color of arterial blood. Compresses dipped in warm water were applied to back of hand. Had then the following prescribed at evening.

R. Spts. ætheris nitrosi f3 vj.
Tinct. opii f3 ij. M.

Take gtt. xlv. every twenty minutes, till pain is alleviated. At 9, in evening, took gtt. xxxv. and repeated every twenty minutes, increasing dose to 1. gtt.s. and continued them until twenty minutes past 12 o'clock. Soon after pain diminished; had some sleep, interrupted at short intervals by troublesome dreams. This disturbed sleep continued till half past 3; then became wakeful, and continued so till morning. Half past 4, pain returned. Compresses dipped in cold water were applied to hand during night. Leech bites bled all night; skin dry and hot; tongue somewhat surred, very thirsty; pulse at times full and bounding, at others soft and natural; hand very hot, heating the wet compresses very rapidly; finger warm and sensible; hand considerably swollen, with red lines, prominent and extending from finger up the whole length of the arm; glands in axilla swollen, painful on pressure.

Monday, 29. Muscular strength much diminished; no desire for food; bowels regular; hand painful; cold spirit and cold water alternately applied to hand; was ordered venesection f3 vij. from arm; continue cold applications to hand, which was less painful during day. In evening, after going to bed, became very painful; cuticle of finger apparently dead, discolored, and distended by swelling underneath it. The two first phalanges were sensible; end of finger cold. The pulse could not be felt in the finger, though very evident in the forefinger; the whole hand above the finger was red and tensely swollen. The water and spirit were frequently applied during evening, but with little effect. Between 10 and 11 o'clock, seven leeches were applied, two on the finger and five around the metacarpal joint. The bleeding was afterwards promoted by warm water, and probably f3 v. of blood were procured during the night. The finger became warm while the leeches were drawing, and some temporary relief was obtained. The hand, however, continued through the night red, distended, hot and painful. Pulse strong and full, 80 to 100. In evening took pulv. opii gr ij.

Half past 11. Tinct. opii f3 j.
Half past 1. do. do f3 ij.
2. Æth. and laud. gtt. lx.
Quarter past 2. Æth. and laud. gtt. xl.
Tinct. opii f3j.
Half past 2. Tinct. opii f3j.
3. Æth. and laud. f3iss.

Constantly uneasy until 3, A.M. Then remained tolerably quiet till morning, having a little disturbed sleep.

Tuesday, 30th. Bowels well, no appetite; have taken no nourishment since Friday, except arrow-root; for drink, toast water, lemonade, tartaric acid and water. Slept about two hours in forenoon. Cold applications continued; hand occasionally showered with cold spirits, which gave temporary relief to pain. In evening, compresses dipped in a solution of plumb. sub. acet. liq. were applied. Pain became intolerably severe after this; finger swollen; very tense; discolored at middle joint; colorless at extremity; numb. Pulse 92, hard and strong. Glands in axilla swollen and painful. Half past 10, applied poultice, and renewed it at half past 11. This remained on till morning.

Half past 10, took acet. opii gtt. xv.
11, do. do. xx.
12, do. do. xx.

Half past 12, do. do. xx.
1, do. do. xx.
Half past 1, do. do. xx.
2, do. do. xx.

Night more quiet after opiates but no sleep; pain severe through night, apparently as intolerable as in evening. Pain gradually subsided after opiates were omitted; sometimes only felt in middle finger, at others in cutis of palm of hand, at others in joints and back of hand. 5 o'clock. Pain entirely subsided; body entirely free from pain. Half past 5. Pain in hand commenced again; when free from pain not disposed to sleep. At half past 6, slept a few minutes for the first time during night.

Wednesday, December 1st. Cuticle over middle bone of finger much distended with fluid; also cuticle in palm of hand raised and prominent. Cuticle laid open by Dr. Warren. A considerable quantity of bloody serum was discharged from finger; from palm of hand, serum. Continued poultice; hand less painful; bowels pretty free; slept some during day; in evening quite uneasy; very thirsty. About 12, slept about fifteen minutes; then became watchful and restless. Pulse 92; skin dry and hot; much annoyed by heat in bowels and lower extremities. Cloths dipped in cold water were applied on abdomen, which were very grateful. At 2 o'clock took Tinct. opii et Æth. nitr. gtt. c. Afterwards a little dozing but no sleep. 5 o'clock. Pulse more frequent and full; pulsation of heart very strong. 6. Slept a little while sitting up.

Thursday, Dec. 2d. On removing poultice, cuticle found to be separated and hanging loosely about the finger. On first bone of middle finger, a well marked line of separation was formed by a sulcus running transversely on back of finger and obliquely on the inside to palm of hand, leaving the muscles covering the two posterior thirds of the back part of this bone. The parts under cuticle, and covering the second and third bones of finger, were of a dark color, and in appearance had lost their vitality. Prescribed for as follows:—Bathe the finger in hot alcohol every three hours.
Apply a poultice half yeast, and the other half Indian meal. White bread and milk poultice to hand. Take cinchona and wine freely if borne well.

At 10 o'clock, A.M. alcohol and poultices were applied. Took cinchona pulv. 3 j., two table spoonfuls of wine, and water q. s. At 1, P.M. alcohol reapplied. Half past 1. Took a tea-cupful of beef tea. Wine and cinchona being borne well, they were used pretty freely. Alcohol and poultices applied every three hours. 9, P.M. After removing poultices there was a free discharge of pus from an orifice in the palm of hand near middle finger, connected probably with a sinus between the fore and middle finger, leading to the back of the joints of middle finger, as it flowed from the orifice, when pressure was made on the back of the hand. Had arms and chest sponged with soap and water; poultices renewed every three hours during night. Slept tolerably well after 12 o'clock.

Friday, Dec. 3d. Back of hand suppurating freely in deep seated parts, and discharging itself through an orifice on side of middle finger and next to ring finger; was prescribed for as follows:—Continue poultices and alcohol, putting a pledget of resin cerate around the finger. Continue cinchona and wine.

R. Tinct. rhei 3 ss. at bed time.

In forenoon took a roasted apple; having a pretty good appetite, ate a small piece of beef steak and half a water cracker for dinner; in evening a cup of tea and one water cracker; in night slept well. After 12 o'clock, sweat profusely during sleep.

Saturday, Dec. 4th. Hand suppurating freely in deep seated parts and discharging itself through orifices near the middle finger; finger not altered in appearance; numb; line of separation made evident. Two dejections from rhubarb, pretty free; appetite good. Took coffee for breakfast, beef steak at dinner, and tea at night; at 11 o'clock, went out into the open air and walked a few rods; slept well in night.

Sunday, Dec. 5th. Hand and finger much as yesterday; appetite and strength increasing. Took boiled chicken for dinner. Finger bent up; dark colored, and not exhibiting any properties of vitality; cuticle hangs loosely about it.

Friday, Dec. 10th. Hand has continued suppurating since last record; finger bent up, dark colored, and destitute of sensation; line of separation more perfect; flexor tendon denuded near palm of hand; suppuration on back of hand stopped and orifices closed up; suppuration in palm of hand continues, but discharge is much less for three or four days past; appetite and strength much increased; general health good. Go into the open air ad libitum.

At 2, P.M. finger amputated, with metacarpal bone, and parts brought together by adhesive plaster. Hand painful, or rather a burning sensation in it, during remainder of day, and through the night. Slept tolerably after 12 o'clock.

Saturday, Dec. 11th. Hand feels much the same as yesterday; appetite and digestion good; bowels regular.

Sunday, Dec. 12th. Hand less painful; considerable discharge of bloody serum and purulent matter; adhesive plaster found to be starting up on account of discharge.
from parts. At 2, P.M. dressings removed; flap partly united by first intention, but next to palm of hand there is a considerable cavity through which sanious pus is discharged, from deep seated parts of the palm of hand. There was a pretty free suppuration at this part before amputation.

Monday, Dec. 13th. Hand painful in afternoon and in night; did not sleep until 3 o'clock. Hand dressed in morning. Suppuration pretty free from palm of hand; considerably swollen at point of amputation.

Tuesday, Dec. 14th. Hand free from pain; general health good; bowels well.

Wednesday, 15th. Hand somewhat painful in morning; dressed; cavity nearly closed; at 11 o'clock became very painful; seat of pain apparently at the end of metacarpal bone of finger amputated, extending to back of hand and metacarpal bone of ring finger; on examination, back of hand found to be red and considerably swollen; pain continuing pretty severe at 2, P.M.; hand examined by Dr. Warren, who ordered dressings to be removed and poultice to be applied. Quarter past 2, applied pretty large poultice to back and palm of hand; pain somewhat mitigated by them; poultices renewed at 6, P.M.; pain in hand much the same; pain extending to the arm; glands in axilla swollen and painful. Poultices renewed at 10 o'clock in evening; shortly after pain subsided; slept well.

Thursday, 16th. Poultices renewed; no pain; swelling and redness diminished; appetite good; bowels well; during day, hand mostly free from pain; occasionally pain darting up the arm; swelling in axilla not gone; not painful, however.

Saturday, 18th. Hand easy. Poultice discontinued; parts dressed with simple cerate.

II.

Of After-Floodings, and their Treatment.—From Lectures delivered at Guy's Hospital,

By Dr. James Blundell.

After-Floodings.

By after-floodings, Gentlemen, you are to understand, those discharges of blood which take place subsequently to the expulsion of the child, before or after the birth of the placenta. And as these floodings differ a good deal with respect to their circumstances, I propose to devote this Lecture to the consideration of their several varieties.

After the birth of the child, we sometimes meet with large discharges of blood from the uterus; and these discharges may either be produced by the presence of a portion of the placenta, which has been left behind in the womb unperceived by the accoucheur, or, without such retention of the placenta, they may now and then be occasioned by the lodging of a clot of blood. That a part of the placenta is retained, we may suspect, if pains like those of labor occur—if, too, the discharges from the womb are foetid, and if the bleeding have stopped and made its appearance again, perhaps some three or four days after delivery; and this suspicion once excited, provided circumstances require, an examination may be made, when, if there is anything in the uterus, it will most proba-