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Case of Paruria Erratica, or Uroplania. By SALMON AUGUSTUS ARNOLD, M.D.

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MARIA BURTON aged 27 years, of sound constitution, generally enjoyed good health until June 1820, when she was afflicted with a suppression of the catamenia accompanied by hæmoptysis. The physicians in attendance, irregular practitioners, bled her profusely every other day, and after the system had become greatly debilitated injudiciously administered emetics, to the operation of the last of which succeeded a prolapsus uteri, and a total inability to perform the function of urinary secretion. In this state she continued for nearly two years and a half without any alleviation of the disease, though she had been for the most part of the time under the care of respectable physicians. The urine had been drawn off by the catheter generally every twenty-four hours, but when neglected was often perspired very profusely about the lumbar region.

In September, 1822, soon after I first saw her the urine not having been drawn off by the catheter for seventy-two hours, found an outlet by the right ear, oozing drop by drop, and so continued for several hours after the bladder had been emptied. The next day at five o'clock P. M. it again commenced and continued about as long as on the day preceding, but a larger quantity was discharged. This was projected on a heated shovel and gave out that odour so peculiar to this secretion, indicating the presence of urea. It continued to be discharged

once a day for several days, oozing out guttatum, commencing earlier, increasing in quantity and being discharged in less time; then twice a day at three and seven o'clock P. M., varying but very little for some days, then three times a day at two, nine, and eleven o'clock P. M., and so continuing, then four times a day, at ten o'clock A. M. and from eight to eleven o'clock P. M., increasing gradually in quantity and being discharged in less time until a pint was discharged in fifteen minutes in a stream, about the size of a crow quill, then becoming more irregular being discharged every few hours, and increasing in quantity until eighty ounces were discharged in twenty-four hours. The discharge from the ear was accompanied by a severe pain over the right eye and about the right ear, with a distressing sensation of fulness. The pain commenced early in the morning, and continued to increase in violence until after the discharge from the ear, by which it was relieved. When the urine was not discharged at the usual period, or much diminished in quantity the pain and distress were most excruciating, producing delirium, during which confinement was frequently necessary to prevent her from doing violence to her head. Sometimes a deficiency of the discharge would produce delirium, apparently without much pain; she would then laugh, sing, and converse very incoherently, though frequently with an unusual degree of wit and humour. At other times she would be seized with violent spasms resembling opisthotonos; and after continuing in this situation for a few minutes, the muscles becoming relaxed, she would heave a deep sigh, and then swoon, and remain in an insensible state for about half an hour, when she would sob, perhaps open her eyes, and after repeatedly sighing would again become insensible. In this condition she would frequently remain for more than twelve hours in succession. Sometimes the spasms would be unaccompanied with swooning, at one time her jaws were firmly closed for twenty hours, so that it was impossible to pry them open, and at another time they continued closed for more than three days. The swooning would frequently be unaccompanied with spasm, and she would continue insensible for more than twenty-four hours, the pulse imperceptible at the wrist, and respiration only perceptible by the nicest observation. The sight of the right eye was soon destroyed, and frequently that of the left was so impaired that she could not distinguish any object across the room, but the latter is now entirely restored. The hearing of the right ear is so much impaired, that she cannot distinguish sounds, and there is a constant confused noise heard by her like the roaring of a distant water fall. For a short time previously to

the discharge from the ear, there is a very audible noise, resembling that produced by water slowly dropping into a vessel, which may be heard at the distance of several feet. She has no power excepting by an inclined position of the head over the discharge, previously to which there is a very painful sensation of fulness and a burning heat about the right ear.

The next outlet the urine found was by the *left* ear, a few moments previously to which discharge, a similar noise is heard to that noticed in the right ear, she cannot hear distinctly for ten or fifteen minutes previously, and after the urine passes off. This discharge is very irregular, sometimes three or four times a week, and then is discontinued for months.

Soon after the discharge from the left ear, the urine found another outlet by the left eye, which commenced weeping in the morning and continued for several hours, producing considerable inflammation; it continued three days and then ceased; sufficient of the discharge was saved to test its properties, in these, and in appearance it did not differ from the discharge of the ear. In the summer of 1824, it recommenced and continued daily for about six weeks. An account of the quantity of this discharge may be found in the appendix.

On the 10th of March, 1823, urine began to be discharged in great quantities from the stomach, unmixed with its contents. The greatest quantity was generally discharged in the morning before taking food, but it was frequently discharged soon after food had been taken, with which it was often entirely unmixed. This discharge has been more regular than from the left ear and eyes, but less so than from the other outlets.

On the 21st April, the right breast became tense and swollen, with considerable pain, and evidently contained a fluid, a few drops of which oozed from the nipple. The swelling and pain continued about twenty-four hours and then entirely ceased for about a week, when it again returned, and there was discharged a light yellow fluid resembling urine. On the 29th, one ounce was caught in a nipple shell which by analysis was found to contain urea. This discharge has been very regular up to this time. Urine has been discharged occasionally from the left breast, an account of which may be found in the Appendix. November 20th, 1823, the urine from the breast became milky, having the appearance of milk considerably diluted with water; this continued until December 12th, when it gradually resumed its usual colour.

May 10th, 1823, The abdomen about the hypogastric and umbilical region became violently and spasmodically contracted into hard bunches, and a sharp pain was felt shooting up

from the bladder to the umbilicus, around which there was a severe twisting pain; in a few days subsequently a loud noise was heard, similar to that produced by drawing a cork from a bottle, and immediately afterward urine spirted out from the navel as from a fountain. This discharge has since continued and has rarely been interrupted for many days.

Nature wearied in her irregularities, made her last effort, which completed the phenomena of this case, and established a discharge of urine from the nose. This discharge commenced on the 30th of July 1823, oozing in the morning guttatum and increasing in quantity every day until it ran off in a considerable stream. It continued daily for about two months, when it ceased until the summer of 1824, and then again commenced and continued almost daily for some months, since which it has entirely ceased. All the fluids discharged were found by analysis to contain urea. The following is the analysis, of the fluid discharged from the right ear, made in New-Haven, under the direction of Professor Silliman. "Alkaline Sulphates were indicated by muriate of Barytes and Acetic acid; Murates were detected by Nitrate and Acetate of Silver, and by Nitrate of Mercury; Phosphates were ascertained to exist by the addition of caustic, ammonia and Lime water. Urea was obtained in the usual manner by evaporating the fluid and re-dissolving in Alcohol and again evaporating."

The urine discharged from the ear was, during the first six months hotter than that from the bladder, producing by its heat pain in the external ear.

The urine from the bladder turned black when not drawn off at the usual period, and deposited a sediment resembling black sand. Sometimes after this black sediment was precipitated the fluid would be of a dingy yellow colour, at other times it would be as black as ink. The urine from the bladder was frequently very high coloured before it turned black, but frequently turned black when it was as perfectly limpid as spring water, and on several occasions it has been noticed that when it was most limpid the largest quantity of black sediment was precipitated. The discharges from the other outlets have, occasionally all turned black; a more particular account of which may be found in the Appendix. They differ however in one respect from the discharge from the bladder, since from the bladder it has never come off black, while it frequently has from all the other outlets. This changing of colours in all the discharges from the different outlets at the same time, is a most convincing proof of the identity of the fluids discharged.

Since the obstruction of the catamenia there has been a discharge of blood supposed to be vicarious, it has generally come on every five or eight weeks, sometimes at the regular period. For the first two years there was a discharge of blood occasionally from the stomach and lungs. It has since been discharged from the stomach and lungs, from the right and left ear, oftener from the left; from the right and left breast, more frequently from the left; from the navel, and from the nose. From the nose and the right ear it has generally been mixed with urine, nearly three fourths urine, from the left ear with about equal parts urine and blood, from the stomach and lungs, with the contents of the stomach and the secretions of the fauces, from the left breast and navel it has generally been unmixed with any other fluid. It was frequently foetid—the colour always dark—it sometimes, though not generally conglutated.

When the urine was not drawn off from the bladder for forty-eight hours or longer, the quantity found in it was always less than when drawn off every twenty-four hours. Sometimes when the urine was not drawn off from the bladder for seventy-two hours, it would be found to contain only one or two ounces. From which I was induced to believe that the discharge from the bladder was almost entirely useless, and that the functions of the system might be performed with very little disturbance without the excretory office of the bladder. Accordingly I omitted to draw off the urine for seven days, when three ounces only were found in the bladder, during which period, the discharges from all the other outlets were increased, and her health did not appear to have in the least suffered. Both the quantity of fluid drank and the quantity discharged from all the outlets during the twenty-four hours, was for several days ascertained and the difference found to be very small.

When the urine was drawn off from the bladder two or three times a day, the quantity discharged from all the other outlets was much decreased, from which I was induced to think, that if it should be drawn off every two or three hours, it would be prevented from passing into the system, and being discharged from the other outlets. I therefore introduced an elastic gum catheter, and directed the urine to be drawn off every two hours, but the catheter in half an hour would be filled up with a thick glutinous substance. This was frequently repeated with no better success. Numerous instruments were invented and when used were all equally unsuccessful.

Pessaries of every description and other means to restore the parts to their natural situation, were used, and for a long time continued without any advantage.

The quantity of urine discharged from all the outlets was so great, and so much beyond what has been thought possible, that I was apprehensive there might have been some deception—to remove every doubt I and my friend Dr Webb, who, at my request had occasionally attended her, remained with her four hours alternately during nearly twenty four hours, and the quantity discharged during this time was as large as it had been for several days previous to, and after this period. There never has been any doubt, that these fluids which have been proved to be urine, were actually discharged from the ear and the other outlets, since the fact has been proved day after day by ocular demonstration.

This great disturbance in the system continued to increase for nearly six months, and it was the opinion of all who saw the patient that she could not survive from day to day; after which period it gradually abated, and she is now when the urine is freely discharged, so much relieved that she is able to walk about her room, and during the summer of 1824, frequently rode out. The discharges from the right ear, the right breast and navel, continue daily, but they are not so great nor so frequent as they were a year since, from the bladder the quantity is as usual, from the stomach, nose, and eye, there has for some months been no discharge.

How the urine has found its way to these different outlets has hitherto never been explained. It is an interesting question, and I have made some satisfactory experiments which I intend soon to communicate to the public.

Providence, (R. I.,) Jan. 25th, 1825.

Since the above was prepared for publication I was much surprised to observe, a very *incorrect* and *imperfect* history of this case in the last number of the New-England Journal, by Dr J. D. Fisher, "gathered from verbal reports," and "occasional visits," (*one visit only!*) If he had known that no other history of the case would have been given to the public he *might* then have been justified in publishing this *incorrect* and *imperfect* one, but he well knew previously to the publication of his dissertation that I was preparing this case to communicate to the public.

Several medical *gentlemen* among whom are Drs S. L. Mitchell, and Dr Hosack of New York, have long had by them letters containing a history of this case, and could have published one, much more *correct* and *perfect* than Dr Fisher's, and, though the publication has been so long unavoidably delayed

yet none of them have felt authorized to communicate any thing to the public.

August 14th, 1825.

Note.—We publish at the particular request of Dr Arnold his remarks with regard to the anticipation of the publication of this case by Dr Fisher in our last number. We regret that he should have taken offence at this circumstance, and we did not regard it in the light of an interference, as he seems to do. Dr Fisher's publication, it is to be recollected was not a simple account of this case, but a dissertation upon the disease of which this was a particular instance—an instance used in common with a variety of others as means of illustration or ground of argument in the course of his essay, and occupying but an inconsiderable portion of it. Whether an author has a right to use in this way, materials thus acquired, we do not pretend to judge. We would add that it was at our request that Dr Fisher consented to the publication of his Dissertation, and that it was not put into our hands until after he had left the country. *Ed. N. E. Journ.*

APPENDIX.

A Diary of the discharges, the appearances and changes in them, together with the most prominent symptoms from the period of the first discharge, until those from all the other outlets were established.

1822.	bladd.	r. ear.	
Sept. 21	37	34	{ From bladder on 21st turned black, from ear on 21st, 22d, and 23d, not measured, but quantity calculated from wet clothes.
22	16	5	
23	15	7	
24	14	10	Violent pain in head relieved by discharge from ear, pulse 100—skin dry—tongue coated.
25	11	12	Pain increases with sensation of fulness—discharge guttatim—pulse 100.
26	12	13	Pain increases—pulse 100.
27	11	15	Pain very violent—discharge more rapid.
28	12	14	{ Pain more violent—pulse 120—skin dry and hot—tongue much coated.
29	13	13	
30	12	15	

1822.	bladd.	r. ear.	
Oct. 1	310	314	Pain still more violent—urine from ear very high coloured—discharged in stream size of a crow-quill
2	12	14	34 urine discharged in five minutes—pain commenced about 10, and increased in violence until 5 o'clock, when urine was discharged and head relieved—light extremely painful—can scarcely discern objects with right eye.
3	24	14	Urine by cath. twice—discharge commenced two hours later—in other respects no change.
4	12	13	
5		14	Cath. from cause unavoidable not used.
6	4	17	Cath. used at 10 o'clock after an interval of 36 hours, during which 332 from ear—and only 34 from bladder, discharge commenced 6 hours earlier—from ear and bladder high coloured—from bladder after standing a few hours turned black.
7	30	15	Cath. used morning and evening—pain in head violent—other symptoms unchanged.
8			Introduced an elastic gum cath. and directed urine to be drawn off every two or three hours—cath. filled with a thick viscid substance—urine not drawn off for 36 hours—complains of urinous taste—face and feet œdematous—urine from bladder turned black as ink, and deposited considerable sediment—pulse 120—symptoms unchanged.
9	16	67	
10			
11	6	24	Witnessed discharge of 310 in fifteen minutes.
12	18	33	Commenced guttatum and increased to size of a crow-quill—from the ear much hotter—higher coloured urinous odour stronger than from bladder—pulse 120.
13	14	57	39 discharged in presence of J. MacRie, M. D. and Mr. Webb, student of medicine, in about half an hour—commenced oozing gradually, increased to a stream size of a crow-quill—produced pain from the

1822.	bladd.	r. ear.	
Oct. 13	8	8	heat, in which the thermometer rose to 104, and fell to 94 in that drawn from the bladder—from ear higher coloured and stronger urinous odour than from bladder—less pain in head.
14	14	43	Discharge from ear 10 o'clock A. M. usual colour, after standing a few hours turned as dark as pale ink—4 P. M. a large discharge, usual colour—in about two hours turned a darker colour than that discharged in the morning—8 P. M. 88 discharge in presence of Messrs Fales and Willard, students of medicine, darker than previous discharge, nearly as black as the black urine from bladder—from bladder turned black after standing a few hours and deposited a sediment resembling black sand—pain and heat in head most excruciating—eyes inflamed—pupils dilated—hearing of right ear impaired—pulse 140—skin dry—tongue coated—very thirsty—drinks freely.
15	13	40	From ear dark coloured—sediment resembling black sand is deposited—proportion of sediment one third—other symptoms same as yesterday.
16	14	48	From ear muddy, but lighter than yesterday—from bladder turned black upon standing few hours—pulse 140—in great distress.
17	16	64	From ear turbid, nearly as light as natural—pain in head—eyes a little relieved—from bladder natural colour.
18	12	62	From ear straw colour—from bladder same; vomited 36 blood—dark coloured—soon coagulated.
19	20	65	By cath. twice—witnessed discharge of 312 from ear in five minutes, previously to which the bladder was emptied.
20	35	44	By cath. three times—pain in head increases—eyes more painful—is wild and delirious—pulse 140—tongue coated and dry.
21	20	45	From bladder twice—symptoms unchanged.

1822.	bladd.	r. ear.	
Oct. 22	317	364	By cath. twice.
23	16	70	By cath. twice—respiration laborious—other symptoms unchanged.
24	15	48	By cath. twice—respiration more laborious—head more painful—right side is numb previously to discharge from ear, by which relieved.
25	16	63	By cath. twice.
26	15	80	Pain in head relieved—other symptoms same.
27	20	50	Symptoms relieved.
28	8	80	
29	16	64	
30	14	50	
31	16	48	
Nov. 1	12	45	Convulsed throughout the day—spasms very violent.
2	16	40	
3	12	8	
4	16	12	
5	14	10	
6	4	12	Spasms violent—respiration laborious—palpitation of heart—symptoms indicating hydrothorax.
7	16	8	Spasms and other symptoms continue—pulse 140—skin hot and dry.
8	14	18	
9	14		Spasms continue—other symptoms relieved.
			Spasms relieved.
			Spasms very violent—pain in head excruciating—accompanied by sensation of fulness, and weight—palpitation.
10	16		Spasms more violent—pain and sensation of fulness continue—respiration laborious—palpitation increases—eyes very painful—pulse 150.
11	15	12	Pain in head relieved.
12	14	10	Less pain in head—difficulty of respiration increases.
13	14		Pain in head more violent accompanied by delirium.
14	6		Pain in head excruciating—delirium increases.
15	12	16	Pain in head and delirium continue.
16	14	8	
17	15	10	Delirium relieved in some degree after dis-

1822.	bladd.	r. ear.	
Nov. 17	3	3	charge from ear—pain in head and other symptoms continue.
18	12	1	} Delirium relieved—spasms increase.
19	14	8	
20	14	24	Spasms relieved—vomited 34 blood—dark colour.
21	9	15	From Nov. 21st to Dec. 7th, from cause unavoidable no history of case.
Dec. 7	8		Violent pain in head with sensation of fulness—and burning heat about right ear—delirium—skin hot and dry—tongue much coated—pulse 140.
8	10		} Pain in head increases—other symptoms continue.
9	20		
10	1		Pain in head excruciating—other symptoms continue.
11	20	16	Pain in head and delirium in some degree relieved.
12	14		} Delirium increases—pain in head more violent.
13	16		
14	10	12	} Delirium continues—less pain in head.
15	12	8	
			From the 15th to 22d, no discharge from ear—from bladder rather more than usual quantity—not measured—delirium violent—pain in head most excruciating with sensation of fulness—burning heat about right ear—pulse 150—palpitation—skin dry—tongue coated.
22	12	8	} Pain in head relieved after discharge from ear—other symptoms same.
23	14	8	
24	10	24	
25	7	8	
26	10		} Pain in head more violent.
27	12	4	
			From 27th to 31st of Dec., no discharge from ear—increased quantity from bladder—increased delirium—violent pain in head pulse 150.
1823.			
Jan. 1	12	32	} Delirium and pain in head relieved—urine from ear coloured with blood—on 3d, Cath. not used—on 4th, urine from bladder black.
2	14	32	
3	1	52	
4	2	50	

1823.	bladd.	r. ear.	
Jan. 5	33	326	Pain—delirium—palpitation—and all the symptoms entirely relieved—pulse 100.
6	8	66	
7	12	60	
8	12	47	
9	8	50	
10	12	6	Pain in head increases—spasm and swooning alternately.
11	8	12	
12	16	30	Pain in head relieved—spasm and swooning not so frequent.
13	12	39	
14	14	25	Urine discharged from <i>left</i> ear—about 3ss. saved—in odour and colour does not differ from discharge from right ear.
15	12	8	Pain in head more violent—swooning frequent—pulse 140.
16	10	8	Swooned ten times—sometimes remains insensible more than an hour.
17	8	12	Pulse 120—swooning not so frequent, nor so long insensible.
18	2	20	
19		12	
20	8	7	Urine from bladder turned black—swooning relieved.
			Delirium from 21st to 25th, so wild and raving as to suffer no one to come near her—on 24th, no urine from ear, though the usual sensation of heat and fulness—generally felt previously to the discharge—urine discharged from left eye guttatim about 2 hours in morning.
21	12	10	
22	14	9	
23	20	4	
24			
25	16	32	From ear when discharged as black as pale ink—from bladder turned black after two hours—urine continues oozing from eye in morning—pain in head relieved—delirium continues—is very humorous—laughs and sings and talks incoherently—pulse 120.
26	16	32	More rational—swooning returns, succeeded by unusual numbness, except in the fingers—pain changed from vertex and over right eye to back of the head—urine continues weeping from eye—31 saved, does not differ from discharge from ear—pulse 120.
27	16	30	After swooning continued insensible for an

1823.	bladd.	r. ear.	
Jan. 27	8	8	hour—not the least sensation for several hours excepting about the windpipe—urine from eye ceased—pulse 121—pain in head continues.
28	12	28	} Swooning not so frequent—succeeded by numbness of right side.
29	6	22	
30		7	Swooned at 10 A. M. and remained insensible until next day at half past 10 o'clock A. M.
31	10	27	From ear turbid—from bladder light inky hue—both turned black—swooning relieved.
Feb. 1	12	24	In evening from ear 314 in presence of Mr. Webb and myself, as black as ink—specimens were sent to Dr Mitchell, New-York and Dr Gorham, Boston.
2	10	20	From ear colour of pale ink—from bladder turbid and turned black.
3		24	} From ear turbid—though no urine from bladder, yet no distension—from left ear 36 bloody urine.
4		26	
5		80	
6	14		Violent pain in head—scalp tender and painful.
7	8	16	} Head very painful—pulse 140.
8	8	12	
9	16	3	
10	8	4	
11		32	
12		28	
13		16	
14		17	
15		20	
16		17	
17		21	} Pain in head relieved—pulse 100—urine from bladder not measured.
18		8	
19		16	
20		18	
21		14	
22		20	
23		18	
24		24	
25		18	
26	12	4	Violent pain and sensation of fulness in head.
27	10	6	} Insensible—drowsing every 3 or 4 hours and immediately swooning—pulse 120.
28	8	11	

1823.	bladd.	r. car.	stom.	
Mar. 1	8 12	8 15	3	
2	12	18		
3	13	17		
4	12	20		
5	14	20		
6	12	20		
7	12	21		
8	14	16		
9		14		
10	8	12	16	
11		16	18	
12	2		20	
13		12	24	
14	18			
15		16		
16	16			
17		6		
18	16	20		
19	20	12		
20	18	8	12	
21	14	16	18	
22	12	12		
23	14	16		
24	12	18		
25	15	17		
26	12			
27	10	6		
28		16		
29	16	18	12	
30		16		

Swooning relieved—head less painful—pulse 100.

Urine from stomach, without much nausea, unmixed with its contents colour light yellow—from ear same—pulse 100.—not much pain.

From bladder turned black—from stomach light yellow.

From ear deep, from stomach light yellow—discharge from stomach found by analysis to contain urea, and some of the salts usually found in urine.

From bladder turned black—pain and sensation of fulness in head.

Pain continues—urine high coloured.

From bladder turned black.

Spasms commenced at 4 P. M., and continued until two o'clock A. M., in the muscles of the jaws, so violent, as impossible to be opened.

Spasms relieved—from bladder black.

Spasms returned.

Spasms relieved—from stomach mixed with blood.

Violent pain in head and delirium—pulse 120.

Pain and delirium continue—pulse 130.

From bladder turned black—from other outlets light yellow—pain and delirium relieved—pulse 120.

1825.	bladd.	r. ear.	stomach	
Mar. 31	3 10	3 6	3 16	From bladder turned black.
April 1	8		16	From stomach black as ink when thrown up.
2	10		8	Violent pain and sensation of fulness in head—delirium—pulse 140—sight of left eye impaired—right entirely destroyed.
3	6	8	16	From the stomach and ear turbid, in few hours turned black—sensation of fulness in head—eyes very painful.
4	10	20		
5	12	16	4	
6	12	12		
7	10	16	18	Pain in head, in some degree relieved—eyes very painful—constant nausea accompanied discharge of urine from stomach.
8	12	18		
9	20	30		
10	16	27		
11	8	16		
12	12	12	16	
13	7	18		
14			61	From stomach as black as ink when discharged—after which pain in head relieved—constant nausea.
15	6	4		From bladder black.
16	10		40	From stomach black.
17	12	18		Pain in head relieved.
18	8	30	28	From stomach black—from bladder high coloured—turned black in few hours.
19	20		18	From bladder dark yellow with a redish cast, turned black after standing few hours—from stomach light yellow and turned black.
20	16	12	30	From ear usual colour, turned black in six hours—from stomach black—from bladder light straw colour, turned black in four hours—in less pain than she has had since urine was first discharged from ear—pulse 100.
21	20	16	48	From stomach black—from ear and bladder light yellow—from bladder turned black—tension and swelling

1823.	bladd.	r. ear.	stomach	
Apr. 21	30	36	8	in right breast—few drops of a light yellow fluid oozes out.
22	24	10	40	Urine from all outlets regained its natural colour—that from stomach has a very foetid smell and saline taste.
23	14	8	40	
24	22	12	64	From bladder straw colour—from ear pale black—from stomach came off in two portions—first 328 rather darker than natural—turned black after standing few hours—the other 336 of deep black—when discharged dull pain in head.
25	16	8	64	From bladder deep orange—ear straw coloured—stomach a very deep black.
26	10	14	36	From bladder straw colour—ear little darker hue—stomach pale black—pain in head and delirium.
27	20	8		From bladder lighter than usual—ear deep orange approaching to red—delirium continues—swooning—and spasms—pain and tension of right breast—few drops ooze from nipple—pulse 120—incubus.
28	18	15	34	From bladder light straw colour—ear dingy yellow—stomach natural colour—while present she put a thick cloth to her breast, in a few minutes was completely soaked with water—which had the smell of urine—when dropped upon a heated shovel threw off the pungent fumes so peculiar to this secretion, indicating the presence of urea.
				r. breast
29	14	16	46	31 From bladder light yellow—ear straw colour—stomach dirty yellow—breast light yellow.
30	16	16	44	7 From bladder and ear straw colour—stomach dirty yellow—breast partly white and partly

1823.	bladd.	r. ear.	stomach	r. breast	
Apr. 30	3	3	3	3	of yellowish cast—patient is rational and complains of nothing except a disagreeable sickness occasioned by the rank smell of urine from breast.
May 1	16	17	28	12	From bladder and ear straw colour—stomach dingy yellow—breast yellow—discharged considerable blood from stomach and complains of gnawing pain.
2	14	6	50	8	From bladder light yellow—ear and stomach dingy yellow—breast three portions—1st a redish tinge—2d limpid—3d considerably bloody, about colour of currant wine.
3	8	9	32	18	From bladder deep yellow—ear, stomach, and breast straw colour.
4	17	16	52	8	From bladder light yellow—rest dark colour.
5	18	17	57	12	
6	16	16	44	12	
7	17		40	13	
8	15	14	40	8	
9	17		42	13	From bladder straw colour—stomach black—breast dark yellow—and turned black.
10		47		17	} From cause unavoidable catheter not used.
11		40		16	
12	18	36		4	From bladder deep yellow—and turned black—other outlets deep yellow.
13	6	18	28	6	From bladder light colour—turned black—from other outlets black—all deposited black sediment—feet and legs œdematous—urine begins to be discharged from navel.

1823.	bladd.	r. ear.	stomach	r. breast	navel.	
May 14	330	313	342	312	310	From bladder dingy yellow—other outlets black—a small discharge from left ear.
15	14	16	76	10	6	From bladder light coloured—ear, stomach, and breast black—navel dirty white—while urine is passing the navel she suffers a painful sensation like that which would be produced by a dagger being thrust into the body.
16	18	13	54	4	24	From bladder lemon yellow, ear and stomach, dirty yellow—one portion from navel same as yesterday—others light yellow.
17	16	12		13	30	The whole lemon or yellow colour.
18	20	16			32	Colour same as yesterday.
19	5	11	20	16	22	From ear, stomach, and navel, like dirty water—breast black—bladder light yellow—316 discharged from left ear.
20	24	16		7	27	From bladder nearly limpid, without sediment—it soon turned black and deposited a thick sediment—ear and breast light colour—navel high coloured and turned black—patient complains of tension and swelling of left breast—this affection differs from the right breast, being attended with a sensation of coldness—in the right is a fluctuation perceived by striking with the fingers—the left is hard and firm—constriction of chest,

1823.	bladd.	r. ear.	stomach	r. breast.	navel.	
May 20	8	8	3	3	8	and a saltish taste which generally precedes the vicarious discharge from lungs.
21	18	10		13	16	Colour of all discharges light yellow—36 of thick dark coloured blood discharged from left breast in morning—pain and sensation of coldness and tension relieved—in evening in presence of Mr Webb, discharged a considerable quantity, which in colour resembled the expressed juice of the <i>phytolacca decandra</i> , and in smell, sulphurated hydrogen given off by putrid eggs.
22	20			9	46	318 discharged from left ear, colour deep yellow—36 from left breast tinged with blood.
23	20	17	12	14	60	The left breast continues painful—small discharge of reddish cast—from navel very high colour—from bladder limpid—others light yellow—the greater part discharged in morning previously to drinking.
24						} No history of case.
25						
26	12	12	14	8	4	From stomach dark colour
27		12		8		
28	$\frac{1}{2}$	12				From bladder black—ear dark yellow.
29	2			8		Violent pain in head sensation of swooning—pulse 150—eyes painful.
30	2	12				} Symptoms continue.
31	10	16				

1823.	bladd.	r. ear.	stomach	r. breast.	navel.	
June 1	3 12	3 16	3	3 12	3	} Less pain in head.
2	12	30		8		
3	14	32		6	8	} Pain in head and swoon- ing relieved.
4	10	34		6		
5	12	24		6		} 38 of urine from left ear mixed with blood.
6	14	20		8		
7	12	18		7		} From bladder high coloured —turned black—ear and breast yellow.
8	10	24		9		
9	16	20				} From the 12th to 25th ave- rage quantity from ear 3 20—bladder 3 8—breast 3 6.
10		16				
11	4	18		8		} From 25th of June to 2d July, no discharge from either outlet, though cath. used every day—violent pain in head with sensa- tion of fulness—palpita- tion—delirium—pulse 150 —tongue coated—restless —trembling—swooning.
12	8	12		8		
From 2d to 20th of July, average quantity from ear 3 18—breast 3 6—blad- der 3 5—occasionally dis- charge from navel.						
July 21	4	16		8		3 16 discharged from left ear —colour as from right.
22	8	28				From right ear mixed with blood—3 28 from left ear, light yellow—turned black in 3 hours.
23	4	18		8	4	From right ear tinged with blood—3 14 from left— light yellow.
24	14	16		8	12	From right ear mixed with

1823.	bladd.	r. ear.	stomach	r. breast.	navel.	nose.	
July 24	3	3	3	3	3	3	blood—3 12 from left —yellow.
25	16	20		8	8		}
26	8	16		7			
27		18		8	16		
28	7	48		12	8		
29	8						From bladder usual co- lour—turned black.
30		20			16	6	Violent spasms.
31	12	32		8	16	10	Spasms not so violent.
Aug. 1	12	24		8	10	12	From bladder black.
2	16	20		8	12	6	}
3	16	16		8		16	
4		12		8		16	
5	12	16	15	8		16	
6	16	18	20	8		17	From bladder black.
7		16	22	16		12	}
8	4	14	18	16	10	14	
9		28	17	16	12	13	

The following average is calculated from diaries kept by Messrs Charles Goodwin and P. W. Fearing.

Average quantity from August, 1823, to June, 1824—from bladder 3 12—from right ear 3 18—from right breast 3 15—from navel 3 20—from stomach, nose, eye, left ear, and left breast, the discharges have been so irregular that an average has not been calculated.

The following is an extract from the diary kept during the summer of 1824, by Mr Ed. W. Greene student of medicine, which is annexed to show the quantity daily discharged from the left eye.

1824.	bladd.	r. ear.	stomach	breast.	navel.	nose.	l. eye.	
July 20	3 16	3 15		3 12	3 13	3 2	3 2	
21	10	32		36	17	1	1 1/2	
22	16	30		16	10			
23	14	35		20	36	3	3	
24	10	32		8	16	14	13	Health much improved and when discharges are regular, free from pain.
25	12	30		16	30	16	6	
26	20	46		16	38	16	8	
27	16	52		16	48	17	6	
29	12	40		17	37	16	8	
30	16	47		5	20	16	8	
31	10	54		16	44	16	5	
August 14th, 1825.								

Case of extirpation of an Ovarian Sac, designed for the cure of the Hydrops Ovarii. By Jos. A. GALLUP, M. D.

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

THE subject of this case was a Mrs Kendall, aged 48. She had lived in a connubial state for many years but had never borne children, although she had been quite regularly visited with the common catamenial preparations. These discharges even appeared several lunations after the present disease had become very apparent. Her manner of living had been temperate, and her habit might be called pretty good, not however very robust, and occasionally subject to slight and fugitive indispositions.

The first knowledge I had of the case was on the 27th of January, 1824, at which time I visited her in company with Dr Skinner, the attending physician. I was then instructed, that for about four or five months previous, her health had been poor, being subject to pain and distress in her left side, or iliac region, attended with tumefaction; also febrile symptoms, costiveness, dry skin, &c. Upon examination I experienced no difficulty in considering it a case of Ovarian Dropsy. The tumour had already reached the right hypochondrium and covered the margin of the liver, the most elevated however on the