sake of saving the parts—always taking care to make the sides exactly correspond in length, and withdraw the pin in about sixty hours.*—*Am. Journ. Med. Sc.*

II.

CYNANCHE TONSILLARIS, TERMINATING FATALLY BY HEMORRHAGE.

By SAMUEL WEBBER, M.D., of Charlestown, N. H.

IN the Medico-Chirurgical Review for July of the current year, I notice several cases of hemorrhage subsequent to cynanche tonsillaris, one of which proved fatal—two were barely saved by the somewhat formidable operation of tying the carotid artery, and two, after great danger and prostration, by the use of astringents combined with other treatment. These are related as unusual cases, and are in fact the first of the kind I have ever seen in print, though probably other cases have occurred, since I have myself unfortunately met with one which terminated fatally with great suddenness, and which the reading of those above mentioned has induced me to send you for insertion in the Journal.

The case occurred late in the autumn of 1825, in the person of a young woman of about eighteen years of age, who was attacked with a severe cynanche tonsillaris. Thinking that it would get better, as this complaint frequently does, with merely domestic remedies, no professional assistance was had un-

til the third day, when I was called in. I found the throat very much swelled, so as greatly to obstruct deglutition; any unguarded attempt to swallow being followed by severe spasmodic contraction of the fauces, and rejection of the fluid through the nostrils. The face was greatly flushed, with severe headach, and high symptomatic fever.

Free venesection was employed, succeeded by an active emetic, a mercurial cathartic, salines and antimonials, rubefacient liniments to the throat, pediluvium, and, on the next day, the febrile symptoms being somewhat mitigated, a large blister was applied to the throat, while warm and soothing gargles, and the inhalation of steam, were used, followed by acid astringent gargles. These means had the effect of relieving the extreme irritability, tenderness, and in some degree the swelling of the fauces, but did not prevent suppuration, which was evidently established on the fourth day. The abscess in the left tonsil broke on the fifth day, and that in the right, which was less swelled, a day or two later. Great complaint was made of the extremely bad smell and bad taste of the discharge; and the relief obtained as to ease of swallowing, and the like, not being so great as is usual in such a case as this had appeared to be, the outside of the neck was carefully examined, and a small descending bag of matter was found situated in front of the thyroid cartilage, immediately beneath the skin. This was opened by the lancet, and a teaspoonful or more of extremely fetid, thin, ill-conditioned pus discharged. A probe, inserted through the opening, passed obliquely upwards and backwards towards the right tonsil, apparently just in the outside of the

* The preceding ingenious method of operating for hare-lip, lately suggested itself to Dr. J. R. Barton, of Philadelphia, and he actually put it in practice, in September last, in the case of a boy in the Pennsylvania Hospital. Dr. Barton supposed the method to be original with himself.—Ed.

os hyoides. No blood was discharged except a few drops from the division of the skin. So fetid and penetrating was the odor of the pus, that it adhered to my fingers, though repeatedly washed, for several days, and to my gloves, which I put on, on my way homeward, for several weeks.

On the next day after this, the patient seemed to be better; but early in the morning of the second day, her sister, who slept with her, observed her seemingly troubled with something in her throat, and was told, on inquiry, that some phlegm was there, which she wished to raise. Making an effort for this purpose, a small quantity was first raised and rejected; then a mouthful or two more, tinged with blood; then clear fluid blood, which immediately after burst forth from the mouth and nostrils in as large a stream as they were capable of discharging, when the unfortunate girl sank back on the bed, with the blood still flowing copiously from her mouth, and died before an effort could be made to summon assistance out of the family.

Circumstances at the time prevented an examination, though I wished for one very much, as I was extremely at a loss to account for the hemorrhage—not supposing, at the time, that suppurative inflammation of the tonsils would destroy the arteries of the part where it took place. The young woman was fond of singing, and took a prominent place among the members of our village choir,—singing oftentimes with apparently great and painful exertion. It occurred to me at the time, among other suppositions, that some aneurism might have been formed, which burst at this time under the exertion above mentioned, or that the texture of

the lungs yielded, having been weakened by undue exertion. It now seems most likely that the coats of the carotid, or of some large branch, must have been injured by the abnormal suppuration, and have given way. Some very large vessel must have been needed to supply the great discharge so instantaneously ensuing.—*Ib.*

III.

MEDICAL LITERATURE.—NO. II.

For the Boston Medical and Surgical Journal.

A BRIEF examination of some of the standard works—the Classics of Medicine—will serve to elucidate more fully the opinions we have expressed.

We will commence with Dr. Good. This author has written a work in five large volumes, which we cannot but think would be much more useful, were it condensed into two. He displays an immense deal of research, a vast deal of industry, and an abundance of learning. He goes deep into the history of each disease, gives us a sufficiently large number of conjectures upon its causes, remote and proximate, and upon all other matters connected with it. He writes in a good style, and with a pleasant manner. Yet for the student to wade through the five volumes, is an intolerable labor, and a waste of time that might be much better employed. On the other hand, it is liable to equal objections as a work of reference. We go to it in a hurry—are enabled, indeed, by the nosological arrangement, to turn at once to the disease we wish to find; but the facts which we desire to know,—the diagnosis, the causes, or the usual method of