So little being known of the diseases of the lymphatic system, we are anxious to record the above case. What is characterized as serofula in the child, is a complex disease, and cannot be confounded with the above. In this woman nothing is found but general hypertrophy of the glands; the serous membranes are in a good state, the osseous system exhibits no alteration, and there are no knotty cords in the course of the lymphatic vessels, as is the case in some kinds of erysipelas. In the actual state of science, we can only say—there is general ganglionitis, but it does not follow that it is true serofula, since there are none of its constitutional symptoms. If this diagnosis be correct, hyposthenic remedies, whose action is on the lymphatic system, would be indicated, calomel and hemlock for example. It has been thought that cancer has its origin in chronic lymphitis. Why then is this woman exempt from cancer?—*Annales de Thérapeutique*, April, 1845.

20. *Intermittent Mental Disorder of the Tertium type, with double consciousness.*—Dr. DAVIN SKAE relates, in the *Northern Journal of Medicine*, (June, 1845,) the following extremely interesting case of intermittent mental disorder with double consciousness.

The subject of the case was an unmarried gentleman, in the prime of life, connected with the legal profession, of a lenco-phlegmatic temperament, regular in his habits, which have always been retired, and extremely temperate in his mode of life. His complaint commenced with the usual symptoms of dyspepsia—it then gradually passed into hypochondriacism—and ultimately into its present form, a state bordering between hypochondriasis and mental alienation.

The dyspeptic symptoms became a subject of complaint and solicitation to the patient about 10 or 12 years ago. They appeared to have had their origin partly in habits of over-walking before dinner, so as to produce considerable exhaustion, and partly in habits of sitting up to a late hour engaged in reading or in business. The symptoms gradually increased in severity and obstinacy, it being found quite impossible to induce the patient to break through the habits which he had acquired, or to alter in the least the quantity or quality of the diet to which he had been accustomed from his earliest youth.

To the usual dyspeptic symptoms there gradually succeeded a train of morbid feelings, and ultimately of illusions founded upon them. The distress occasioned by flatulent distension of the stomach, and the painful feelings in different parts of the body, which are its usual concomitants, led the patient to consult many medical men, and use large quantities of medicine, which, as he still persisted in the habits in which his complaints originated, and the diet by which they were excited, rather aggravated than abated the evil. The fugitive pains and uneasy feelings experienced in different parts of the body were spoken of as sufferings of a mysterious and unparalleled kind; they were at one time believed to be wind circulating through the veins, and at another, the whole system was imagined to be charged with water. While under the influence of these impressions, the patient, day after day, would sit for many hours in the water-closet, believing that the water was constantly discharging itself; and at another time, he continued spitting incessantly for many weeks, under the impression that his whole frame was becoming converted into saliva.

Feelings of gloom and despondency were at the same time developed:—the most trifling errors of the past were magnified into crimes of unpardonable magnitude, and the future was contemplated with the utmost dread. He commenced a system of reading the Scriptures, psalms, and paraphrases with great zeal and rapidity; this soon grew into a system of rapidly scanning the pages, and incessantly turning over the leaves, and he persuaded himself that he read the whole Bible through, and all the metrical psalms, once or twice daily. He now sat up the greater part of every night, and lay in bed during the day; and when he went to bed, he carefully surrounded his person from head to foot with Bibles and psalm books.

Under the influence of the bodily distress and mental despondency from which he suffered, he not infrequently spoke of drowning himself, or of throwing himself over a window, and on several occasions begged earnestly that he might have his razors. A natural timidity of disposition, and a prevailing conscientiousness, pre-

vented this tendency from displaying itself with any seriousness or determination of purpose.

From an early period in the history of this case, it was observed that the symptoms displayed an aggravation every alternate day. This gradually became more and more marked, and for the last 18 months the symptoms above described have become distinctly periodic. On each alternate day, the patient is affected in the manner just described, and will neither eat, sleep, nor walk, but continues incessantly turning the leaves of a Bible, and complaining piteously of his misery. On the intermediate days, he is, comparatively speaking, quite well, enters into the domestic duties of his family, eats heartily, walks out, transacts business, assures every one he is quite well, and appears to entertain no apprehension of a return of his complaints.

What is chiefly remarkable and interesting in the present features of the case, is the sort of double existence which the individual appears to have. On those days on which he is affected with his malady, he appears to have no remembrance whatever of the previous or of any former day on which he was comparatively well, nor of any of the engagements of those days;—he cannot tell whether he was out, nor what he did, nor whom he saw, nor any transaction in which he was occupied. Neither does he anticipate any amendment on the succeeding day, but contemplates the future with unmitigated despondency. On the intermediate days, on the other hand, he asserts that he is quite well, denies that he has any complaints, or at least evades any reference to them; appears satisfied that he was as well the previous day as he then is, asserts that he was out, and that he has no particular complaints. On that day he transacts business, takes food and exercise, and appears in every respect rational and free from any illusions or despondency; anticipates no return of illness, and persists in making engagements for the next day for the transaction of business, although reminded and assured that he will be unfit for attending to them. On those days he distinctly remembers the transactions of previous days on which he was well, but appears to have little or no recollection of the occurrences of the days on which he was ill. He appears, in short, to have a double consciousness—a sort of twofold existence—one half of which he spends in the rational enjoyment of life and discharge of its duties; and the other, in a state of hopeless hypochondriacism, amounting almost to complete mental aberration.

An endless variety of remedies have been used in the treatment of this case, and among others, those which are believed to be useful in periodic affections, but without marked benefit. The patient has obtained considerable advantage from change of scene and exercise in the open air. But the friends by whom he is surrounded, have not sufficient control over him to carry out those regulations as to diet, exercise, habits, and employment, which should form the most essential parts of the treatment; and circumstances have hitherto prevented his being placed under more efficient control.

21. *Case of Heus—a portion of Intestine discharged by stool.*—The annals of our science contain a large number of cases of intussusception of the intestines, in which the intussuscepted portion has sloughed off, and been discharged by stool; still the following one, related by Dr. NAGEL, of Lemberg, in *Oesterreichische Med. Weekens.*, and copied in the *Gazette Médicale*, 31st of May, 1845, may be read with interest.

K. J., a domestic, 21 years of age, robust, always enjoying good health, except frequent attacks of colic within the last few years, was attacked in the night, 12–13 Feb., 1843, with violent pain in the lower part of the abdomen, accompanied with shivering, frequent vomiting and purging. On admission into the hospital, on the morning of the 13th, he was in the following state: Head hot and painful; tongue foul; thirst; abdomen swollen, and tender to the touch; skin dry; pulse full, hard and frequent; vomiting, with watery stools, tinged with blood. (Antiphlogistic treatment.)

The symptoms continued much the same till the 16th, when they diminished in intensity, and the stools were no longer tinged with blood.

On the 19th, there was violent tenesmus, accompanied, on the 23d, with prolapsus of a portion of intestine, which, however, was easily reduced without causing pain.