nipple. There is a loud systolic murmur heard at the apex and base of the heart and in the direction of the right clavicle. Pulse very small, 100. He was ordered beef-tea, one grain of powdered opium three times a day, and three ounces of brandy daily.

April 24th.—Symptoms the same. Ordered two drachms of bicarbonate of potash and one drachm of tincture of opium to eight ounces of water; an ounce of the mixture to be taken every fourth hour.

25th.—Sick several times during the night, but feels better this morning; no sleep; has less pain; pulse 84, small, regular; less pain on pressure over the cardiac region and epigastrium; double rasping friction-sound heard all over the heart. To have three grains of calomel and one grain of opium immediately; also extra milk and four ounces of port wine.

26th.—Vomited four times during the night; pulse 84; respirations 25; friction-sound not so loud. Omit the mixture, and apply a cantharides plaster over the region of the heart.

27th.—Pulse 80; respirations 20; slept better; no more sickness; friction sound not so loud; profuse acid perspirations; takes his food. Ordered six ounces of wine.

29th.—Friction-sound still heard.

May 1st.—Sleeps well; appetite good; friction-sound faint; there is a loud murmur with the first sound; second sound clear; rhonchi over the right lung. To take the opium at night only. Ordered a saline mixture, with carbonate of ammonia and squills.

3rd.—Friction-sound inaudible; improving.

6th.—The rheumatic and acute cardiac symptoms have disappeared, but he is suffering from an attack of bronchitis.

Under the influence of a stimulating and tonic treatment, with generous diet, he steadily recovered from his bronchitic attack, but was kept in the hospital for some time, the physical and general symptoms being those of valvular disease of the heart, with hypertrophy.

ACUTE RHEUMATISM, WITH PERICARDITIS AND PLEURISY;
TREATMENT BY OPIUM AND STIMULANTS; RECOVERY.

(Under the care of Dr. WATERS.)

Edward F.—, aged forty-two, a Frenchman, by trade a ship's carpenter, was admitted March 27th, 1861. He left New York about three weeks ago, and has been more or less ill with rheumatism ever since. He continued at work, however, up to five days ago, when he had so much pain in his limbs, attended with fever, that he was obliged to take to his bed.

March 28th.—He complains of acute pain in the legs and arms; the joints are swollen and tender. There is some anxiety of countenance, but he has no pain in the chest. Heart-sounds normal but faint. To have one grain of powdered opium three times a day, and bicarbonate of potash mixture; belladonna lotion to be applied to the joints.

30th.—Has pain in the left side on taking a deep inspiration. Pulse small, 120; respirations 40, thoracic. No pain on pressure over the cardiac region, nor yet in epigastrium. A loud grating friction-sound heard over the cardiac region; no increased dullness. Ordered a calomel purgative and a senna draught; to continue the opium.

31st.—Less pain in the limbs, but complains of great pain in the left side. Pulse 104, stronger. The pericardial friction-sounds are not heard, but there are some pleuritic friction-sounds audible on the left side. Pressure over the heart does not bring out the friction-sound. Six leeches to be applied to the left side; to take three grains of calomel and one of opium at bedtime.

April 1st.—Felt great relief from the leeches. Pulse 102, regular; respirations 30. Friction-sound still heard in the left pleura.

2nd.—Pulse 82, stronger; respirations 36. Has had a somewhat restless night, with a tendency to ramble; no pericardial friction sound; no murmur. He takes beef-tea, arrowroot, and milk. To have an ounce of port wine every three hours, and an ounce of the following mixture every four hours:—Liquor of acetate of ammonia, two ounces; tincture of opium, eighty minims; bicarbonate of potash, two drachms; water to eight ounces.

3rd.—Better night; has no pain in the chest, except on deep inspiration. Pulse 84; respirations 32. There is less tendency to ramble; pleural friction-sound still heard on the left side.

4th.—Slept well; no rambling; perspires freely. Pulse 82; respirations 30. Omit opium.

6th.—Steadily improving; no pain in chest. Omit mixture. Six ounces of wine daily.

8th.—Chop diet. To omit wine the following day.

16th.—Greatly improved, but complains of pain in the left side when he moves. Blister applied to the part.

18th.—Pain in side relieved, but complains of pain again in the joints. Iodide of potassium, three grains; Dover's powder, three grains; water, one ounce: to be taken every four hours.

25th.—Discharged cured.

Reviews and Notices of Books.

Lectures on the Diseases of the Kidneys generally known as "Bright's Disease" and Dropsy. By S. J. GOODFELLOW, M.D. Lond., Physician to the Middlesex Hospital, &c. pp. 308. London: Hardwicke.

A MARKED character of these Lectures is the attempt made in them to offer physiologic and pathologic reasons of a definite nature for the whole series of clinical phenomena met with in the different varieties of kidney disease, accompanied in some part of their course by the presence of albumen in the urine. To the student who desires to know what possible or presumable explanations can at present be suggested of the origin of the various units in the complex series of morbid states therein included, Dr. Goodfellow's work may be recommended, provided such recommendation be accompanied by a caution. This caveat is, that, although the work contains much that is probable and ingenious, it inclines to more that is unproven and far-fetched. Whilst it forms a useful *résumé* of the chemico-physiologic investigations with which modern science has enriched a particular department of medicine, we cannot help feeling that its explanations and illustrations are often so happy as to give rise to grave doubts of their permanent stability. If we could but get a few more lectures upon other diseases—as those of the heart, lungs, brain, &c.—carried out upon like principles and with the same credulous enthusiasm as vivify these upon diseases of the kidney, medicine would appear as a science to-morrow. Chemistry, physiology, and pathology are here made to be so pressing in their offers to render ready reasons for the faith which is in us, that it appears to be the height of scepticism and of recusancy for us to delay any longer in initiating a *Novum Organon* in the science of medicine at least, if not in the *ars medendi*. But we are less enthusiastic than Dr. Goodfellow in thus hoping to explain everything in so facile a manner. It is true that we are somewhat chary of the value of *suppositions* in scientific matters; and thus, as regards medicine, we are often obliged to rest satisfied with our experience of it as an art, rather than to boast of its predicative or scientific character. Not so with our author, who is of a different way of thinking, and who supposes a great deal:—

"Suppose the kidney has been previously sound.....in fact we will suppose.....Supposing he happens to be organically diseased at all.....Suppose on the other hand.....But suppose through treatment he recovers from this active condition....." (pp. 172, 173, 174.)

We meet in these Lectures with far too much reasoning of the following kind for our taste:—

"Is it unlikely that what occurs in so many parts should take place in the kidneys also?.....If we could observe what takes place in the tissues generally and in the kidneys in severe cases, we should see something resembling this condition....." (p. 134.)

"Can we suppose that all these morbid processes can go on so extensively?.....To suppose so would be inconsistent with our daily experience....." (p. 137.)

"If any absorption by the lymphatics take place....." (p. 139.)

But we cannot make choice amongst the "ifs;" we are bewildered by them. Currents and polar forces, chemical affinities and intensified actions, fibrillation of exudates, and hypertrophy of matrices, together with plenty of chemical formulæ, may no doubt appear to do much service in the hands of an in-