the exercise of the nerve of sense, but to an impression made upon the nerve and sensibility of the motion of the eye itself. Thus we must not regard the telescope as an optical instrument, but remember also the share in the results of astronomical observations, which belongs to the framework.

EMETICS OF COMMON SALT IN MALIGNANT CHOLERA.

To the Editor of THE LANCET.

SIR,—I have read with much interest the remarks on Cholera in the leading article of the last number of *THE LANCET*. Mr. Beaman's letter too, to which you refer, is one of great value to practitioners at the present moment. I am induced to send you the accompanying statement from the pen of my esteemed friend Dr. Pidduck, in consequence of the remarkable resemblance it bears to that of Mr. Beaman. Mr. B.'s known respectability would, of course, place him above all suspicion of unfair plagiarism, but I am anxious not only to do justice to my friend, whose unobtrusiveness is characteristic, but to give no small degree of confirmation to Mr. B.'s remarks, for which reason I have to request that you will allow Dr. Pidduck's statement a place in your Journal.

It may be well to say that Dr. Pidduck published his plan of treatment in August, 1832, in a letter addressed to the Editor of the *Medical Gazette*, and subsequently in a separate form* (as I now send it to you), for more extended circulation, and adapted to non-professional persons. Dr. Pidduck witnessed the disease on an extensive scale in the district of St. Giles, where he has long been known as an indefatigable attendant on the poor. His experience is decidedly against the use of stimulants in any form, and his success has been very considerable, the failures being almost uniformly in cases where stimulants had been previously administered.

I have not myself had sufficient experience of this plan of treatment to

enable me to offer an opinion with a sufficient degree of confidence, but if I should venture to pronounce favourably respecting any plan, from very limited *data*, it would be of this. Common salt, when administered in large quantities in solution, excites copious vomiting with great rapidity. Whether it has any effect in arresting that peculiar change which takes place in the blood, is matter for question, but it certainly answers all the objects that are sought to be gained by other emetics, and it does not irritate and inflame the gastric mucous membrane like mustard, nor does it depress the vital powers as tartarized antimony and other medicines of the same class. The subsequent treatment is judiciously directed to keep down secondary fever, which has sometimes proved fatal.

There is a cholera hospital in St. Giles's now open. I know that Dr. Pidduck two years ago failed in his efforts to induce the medical men there to give the salt plan a fair trial. This year I am informed, on authority which I cannot question, that of 15 cases received into the hospital 13 have died!! Where so fearful a mortality exists, it becomes a question how far a practitioner is justified in rejecting a plan of treatment which is not contrary to the dictates of common sense, and, much more, one which is confirmed by the experience of two such respectable practitioners as Dr. Pidduck and Mr. Beaman.

I have lately heard of a physician whose favourite mode of treatment is venesection and the exhibition of colchicum. In these days of Hahnemannian medicine, one is hardly astonished at any system of practice, however absurd. Surely few will be found to adopt this plan in preference to that which I have been advocating. I have the honour to be, Sir, your obedient servant,

R. B. TODD, M.D.

5, Hart-street, Bloomsbury,
August 25, 1834.

P.S. Since writing the above I have heard from my friend Mr. Griffith, of Belgrave-street, the particulars of a case of cholera, in which all the symptoms were unusually prominent. In consequence of Mr. Beaman's letter he was induced to try the salt plan, and met with complete success.

* A similar communication was, we recollect, made to this Journal, both by the Central Board of Health (which had been put in possession of Dr. Pidduck's plan), and by Dr. P. himself, but its publication was prevented by the influx of matter relating to the cholera, then prevailing, which compelled us to exclude numerous plans of treatment that were forwarded to our office, the chief suggestion in them being before the public in correspondence already published.—ED. L.

[** From the printed paper accompanying the letter of Dr. Todd, we extract the following passages, for which only have we space in our present Number. The remaining recommendations in the paper relate chiefly to the production of warmth, and the administration of calomel

pills, castor-oil draughts, and cordial and saline mixtures.—ED. L.] :—

"Treatment of Cholera."

"One or two tablespoonfuls of *common kitchen salt*, dissolved in half a pint of warm water, is to be administered (in the spasmodic stage), and the patient's head is to be covered with the bedclothes, and on no account is he to be permitted to rise. One tablespoonful of common salt, in cold water, is to be repeated every hour, till copious vomiting of yellow bitter bile be produced, and a profuse perspiration breaks out. It has never been found necessary to repeat the salt and water more than three times. If the patient complains of thirst, let him drink moderately of thin gruel, soda water, or even cold water, which, instead of retarding, seems to promote free perspiration and the abundant discharge of bile, upon which his safety depends. * * *

"Under this plan of treatment, not a single case of spasmodic cholera under my care has proved fatal, excepting when ardent spirits or laudanum had been previously given, and the salt in consequence failed to produce bilious vomiting. * * *

"In persons of a full habit, *bleeding*, before the administration of salt, may be necessary; but no case of this kind has occurred in my practice.

"J. PIDDUCK, M.D.

"87, Great Russell Street.

August 15, 1832."

ADMINISTRATION OF
EMETICS IN MALIGNANT CHOLERA.

To the Editor of THE LANCET.

SIR,—I perceive that, in a communication of Mr. Beaman, he recommends the saturated solution of salt in water in the treatment of cholera. This was the practice adopted at my suggestion by the medical gentlemen at Wick, and which I adopted myself in all the cases to which I was called, an account of which I published, with a tabular abstract of the cases and the mortality, &c. The object of my present communication is to submit some views of my own which do not exactly coincide with Mr. Beaman's, and to offer some remarks which probably Mr. B. will allow ultimately to be correct.

I was first induced to adopt the salt-water emetic, from having frequently used it, and found it successful in arresting the cold stage of the "intermitting paroxysm." The administration of the hot saturated solution of salt brought on the *hot* stage;

but very often there was a transition directly from the *cold* to the *sweating* stage, immediately after the operation of the salt emetic, without passing through the intervening *hot* stage.

The indication in a paroxysm evidently is to arrest the existing stage by inducing the succeeding stage, which is the *natural crisis* to the next preceding. I was therefore agreeably surprised to discover that this kind of emetic not only arrested the cold stage, but in a great proportion of instances brought on the last—the sweating, the critical solution of the paroxysm—without passing through the hot. The object with me was to terminate the cold stage of cholera, and to bring on febrile reaction, as a better-understood and more manageable form of disease. In many instances the administration of the emetic put an end to the disease at once by inducing sweating; in others fever succeeded which went through its course.

Mr. Beaman attributes the efficacy to the vomiting. I do not; because vomiting induced by any other means *has not* the same effect. In my observations the *vomiting* was easy, no way violent, nor attended with any straining; and I also observed that the more violent the vomiting, either *natural* or *artificial*, the more severe the consecutive fever, the greater the congestion or inflammatory symptoms in the brain, and ultimately the more fatal the cases. A gentleman to whom I was introduced by Sir D. Barry, told me that he found tartar emetic eminently successful. This was administered so as to keep up a constant vomiting till death or convalescence. The spontaneous vomiting is abundant, and I cannot understand the object of increasing it by artificial agencies. The gentleman, however, allowed that the mortality in his practice was one in three, which he considered very moderate. On comparing it, however, with my abstract, I think it will be allowed that the practice is not very successful.

Of the five stages into which I have divided the disease, the salt emetic is applicable certainly to three, possibly to four, viz., the preliminary diarrhœa, the premonitory, the cold, and the collapsed stages. I have not used it in the diarrhœa, because I have found another method sufficiently successful; its effects in the premonitory and the cold stage are very beneficial,—for the detail I must refer to the pamphlet; in *collapse*, it, as well as everything else—every other means with which I am acquainted—fails, and I think it right to state this clearly, lest persons trying it in this stage, and finding it fail, might, from disappointment, abandon a useful remedy, and one which will gene-