Clinical Department.

A CASE OF POISONING BY THE OIL OF HEDEOMA (PENNYROYAL).

BY U. O. B. WINGATE, M.D., MILWAUKEE.

At about noon, November 20, 1888, I was hastily summoned to see Mrs. —, who, the messenger stated, was "in a fit."

I found a woman about twenty years of age lying on a lounge and wholly unconscious; pulse small; respiration very quiet; extremities cold; pupils moderately dilated; no froth in the mouth; could not be aroused. A neighbor present stated that the patient had experienced some domestic trouble that morning, and on hearing a noise she came in and found the patient on the floor, where she had apparently fallen from a chair. No one was in the room at the time she fell. This was all the history I was able to obtain, except that the patient was supposed to be about four months advanced in her first pregnancy.

I was at a loss to account for this condition, but suspecting hysterical causes on account of the history of domestic trouble, I applied digital pressure over the superorbital nerves. In about a minute convulsive movements of the face began, quickly followed by a general tremor over the entire body, resembling a severe chill; then the body gradually and methodically assumed the position of extreme opisthotonos, the patient resting entirely on the occiput and heels. The arms, hands, and fingers became strongly flexed, and the whole body was in a rigid tonic convulsion. In about a minute the muscles relaxed, the relaxation lasting about two minutes, when another convulsion of the same character came on. By this time I had administered gr. $\frac{1}{4}$ morphia sulph. and gr. $\frac{1}{16}$ atropia sulph. subcutaneously. The patient had no more convulsions, but soon vomited and began to answer questions. She then informed me that at 10 A.M. that morning she had taken a teaspoonful of the oil of pennyroyal and a half-teaspoonful of the fluid ext. ergot at a single dose, with the object of procuring an abortion. She was put to bed, heaters applied, and given as much milk as she could be made to take. She talked incoherently for a few hours, complained of great lameness in the muscles of the neck and back, and also of the flexors of the arms. The next morning was sitting up; had some pain in the back, but no uterine action was provoked. Three months later I saw the patient, and she was well advanced in her pregnancy.

As spoken of in the books, this drug is useful in flatulent colic, and also is much used as a domestic remedy in amenorrhœa. There is also a nostrum manufactured and much advertised as "a cure for all female irregularities," known as "Chrichester's English Pennyroyal Pills." In an extended search I have been unable to find any reports of cases where this drug has been resorted to for criminal purposes, or where its toxic effects have been observed.

It may be of some practical importance to note the fact that toxic symptoms did not appear until about one and a half hours after the drug was taken.

This slow action is also true of other oils of this character, especially of the oil of tansy.

Reports of Societies.

BOSTON SOCIETY FOR MEDICAL IMPROVEMENT.

F. B. HARRINGTON, M.D., SECRETARY.

MEETING of March 25, 1889. Dr. W. L. RICHARDSON, President, in the chair.

Dr. J. C. WARREN showed a specimen of cancer of the lip, removed from a man of over 85 years of age. The patient, notwithstanding his age, had made a very rapid and excellent recovery.

Dr. WARREN also showed an aneurism of the innominate which he had formerly operated on by simultaneous ligation of the common carotid and axillary arteries.¹

Dr. JOHN HOMANS showed a specimen of intrauterine fibroid measuring $3\frac{1}{2} \times 3 \times 3\frac{1}{2}$ inches and weighing about two pounds. It was removed *per vaginam* by enucleation from the interior of the uterus. It was necessary to incise the os and neck of the uterus in three places very freely. The process was very difficult and tedious, requiring one and a half hours. Only about one-sixth of the surface of the tumor was unattached to the uterus. The operation seemed necessary on account of hæmorrhage. The patient's age was forty-two years. She has made a perfect recovery.

CRUSH OF THE THIGH.

Dr. HOMANS showed a leg amputated above the knee on account of severe injury. The patient was working about a fly-wheel which revolved through an opening in the floor. The leg was caught between the spokes of the wheel and the floor. The crushing was so severe that amputation seemed necessary at the junction of the middle and lower thirds.

Dr. HOMANS also showed a number of large urethral calculi, which he had removed from a man who had suffered from their presence in the urethra for a number of years.

Dr. A. T. CABOT showed specimens from a tuberculous ankle-joint.

Drs. C. J. BLAKE and Wm. S. BRYANT contributed

REDUPLICATIONS OF MUCOUS MEMBRANE IN THE TYMPANIC CAVITY: THEIR FREQUENCY AND CLINICAL IMPORTANCE.²

Dr. J. GREEN said he certainly could add nothing to the interesting and thorough investigations of the writers. The subject had a very practical bearing, for on account of the thin roof of the tympanum and the liability to caries, the disease was not infrequently followed by fatal meningitis, as had occurred several times in his own experience.

In the proceedings of this society, published in March, 1874, he had called attention to the peculiar obstinacy and danger of otorrhœas associated with perforations of Shrapnell's membrane, which he referred at that time to the retention of pus "among the bones, ligaments and bands which are

¹ See page 529 of this Journal.

² See page 531 of this Journal.