Appendix to the preceding paper by EDWARD STANLEY, Esq. Assistant Surgeon and Demonstrator of Anatomy at St. Bartholomew's Hospital.

When the preceding cases were read at the Society, they excited considerable attention, and as it appeared that no one of the many members present had met with such a case, the addition of the two following may not be unacceptable. They occurred during the last year, one in the practice of my friend Mr. Gillman, Surgeon, at Highgate, the other in St. Bartholomew's Hospital. Mr. Gillman has obligingly furnished me, in a letter, the following account of his case for the use of the Society.

THE subject of the case, to which you refer, was a girl of between three and four years old. The eldest sister, during the absence of the parents, and in expectation of their return, had boiled some tea in a tea-kettle; had taken it off the fire, and placed it on the hob. She then, it appears, stepped out of the room, when the little one, being thirsty, and availing itself of the sister's absence, swallowed a portion from the spout of the kettle. This occurred about seven in the evening, and the mother, on her return, about an hour afterwards, brought the child to my house. The child had been vomiting, during the interval, violently, and was extremely exhausted. The saliva flowed copiously from the mouth, the child having apparently lost all power of swallowing it. Its pulse was small, quick, and feeble; and it referred, as well as it could, the pain

and distress to the stomach, pressing it with its hand. Some oil of almonds in gruel was directed to be given it, with two drops of tincture of opium every four hours, and an aperient medicine in the morning. The case, even in this early period, seemed hopeless. In the morning the child was worse; during the night it had vomited, with little intermission, and was incapable of retaining any thing in its stomach. It now manifested great difficulty of breathing, had a short cough, and threw its head back, as in croup; its pulse was quick and feeble, and its skin cold and clammy. Some leeches were directed to be placed over the trachea, but as the child complained chiefly of its stomach, the attendants placed the greater number at the scrobiculus cordis. The difficulty of breathing increased during this day, and the case assumed still more the appearance of croup; the pulse became more feeble, the skin colder, the face swollen and livid, and the poor little thing continued struggling to exist till the following morning, when it died, thirty-eight hours after the accident. On inspection of the body after death, the whole interior of the mouth, the fauces, pharynx, and the œsophagus, to within a short distance of the cardiac orifice of the stomach, presented the usual appearances of a scald, and the cuticle was easily peeled off from parts of the tongue and upper part of the œsophagus. The lining of the stomach was reddened, not more so, however, than may be perhaps rationally attributed to the previous vomiting; but the lining of the

trachea was much inflamed, and on different parts deposition of lymph was found adhering.

On a review of the facts, and supposing a case of this kind to recur, the general impression on my mind, I remember, was, that my treatment would be much more decisive, the same indeed, or nearly so, as in croup, different as the cause and origin of the symptoms may be. But where the pain and danger from the immediate affection of the organs are so intense and so urgent, what can we do, with rare exceptions, but attend to the symptoms and attempt their alleviation?

JAMES GILLMAN.

Highgate, July 24th.

The case in St. Bartholomew's Hospital, occurred in a child about three years old, who had attempted to swallow some boiling water from the spout of a tea-kettle. The child lived twelve hours after the accident. During the first part of the time it was restless, but with little acceleration of pulse or disturbance of respiration. Without being able to fix upon any particular symptom which positively indicated affection of the brain, this organ was generally believed to be the principal seat of disorder—an opinion which was formed from the appearance of its countenance, which was sunk, the entire absence of all its natural vivacity, and the gloominess of aspect which succeeded. The restlessness gradually subsided as the vital powers de-

clined, and it died with scarcely a struggle. Such was the obscurity of the symptoms, that the only remedies employed were purgatives, which emptied the bowels freely.

Upon examination of the body, a slight effusion of transparent fluid was found between the tunica arachnoidea and the pia mater, and into the cellular texture of the latter. About three drachms of a similar fluid were found in the lateral ventricles of the brain. The vessels of the brain were not preternaturally turgid. There was a slight redness and tumefaction in the mucous membrane of the pharynx, and upper part of the larynx, above the opening of the glottis. The glottis was of its natural diameter; the morbid appearances were just sufficient to show that irritation had existed in the parts. The trachea, œsophagus, and stomach were of a healthy appearance.