

cumstance, of which physicians and practitioners should take note. It is very cheap and abundant, and the future promises an abundant supply. It may be prepared in a variety of agreeable forms; and the verification of its alleged antiperiodic properties is a simple question which may easily be solved by a certain number of practitioners, if some will undertake to give it a fair trial; while the nature of the solution which those trials may afford is really a matter of the very highest importance.

Correspondence.

"Audi alteram partem."

MORBUS ADDISONII.

To the Editor of THE LANCET.

SIR,—I have received the following history of a case of Morbus Addisonii from Dr. Dyster, of Tenby, and which I now forward to you for publication. The case has some peculiarities, especially in the occurrence of repeated epistaxis, but the most important fact remains that the only disease found in the body was that of the supra-renal bodies.

So much incredulity still exists in the profession concerning the truth of Addison's statements that every independent observation is important; and, therefore, I have ventured to send you, at the same time with Dr. Dyster's case, a brief outline of three examples of the disease which have lately been published in contemporary medical journals, but which some of your readers may not have seen. One of these occurred at Dublin, another at Brussels, and a third at Berlin. The last occurred (I think) in the youngest subject yet recorded. If you can find space to publish these together, they will afford so many independent corroborations of the truth of Addison's most remarkable discovery.

I might be allowed to repeat what has been before often stated, that the only morbid condition at present known in connexion with Addison's disease is the conversion of the organ into a mass of low organizable material, which is usually styled scrofulous. No authentic case has yet been published where a mere atrophy or fatty degeneration of the supra-renal bodies has been sufficient to produce the symptoms described.

I am, Sir, your obedient servant,

St. Thomas-street, Southwark, Dec. 1863. SAMUEL WILKS, M.D.

"Miss J. S.—, aged thirty-two, first came under my care on the 5th of March, 1863; a very handsome well-grown girl, a dark brunette, middle height. Her previous history was confused. She was born in the West Indies; had intermittent fever at a very early age; when she was bled more than once to fainting. Menstruation was established without much suffering, and continued till the age of twenty-five or twenty-six, when it ceased at once and for ever. Subsequently she exhibited a varying train of symptoms which were more or less hysteric in their character, and which appear fairly to have puzzled her many medical attendants, but they seem to have concurred in believing that there was disease of the heart. She had great muscular strength, very high intellectual powers, was an accomplished vocal and instrumental musician, and most indefatigable in the special woman's work of schools and visiting the poor. Her father died of a 'tumour,' but there was no proof that it was malignant; mother, a remarkably healthy woman; brothers and sisters healthy, and no phthisis direct or collateral.

"When I saw her she had slight bronchitis, which yielded to simple treatment and a few days' bed. I found no evidence of heart disease; the lungs were perfect; no gastric tenderness; no splenic enlargement. She suffered slightly from piles; pulse feeble and variable; urine healthy; bowels habitually costive; no leucorrhœa; appetite bad; tongue white and creamy; frequent nausea and occasional vomiting; great indisposition to exertion, mental and bodily. Under the use of iron and quinine she improved very considerably, and appeared going on well.

"On the 18th of March I was sent for and found that her nose had been bleeding violently for an hour and a half. After in vain endeavouring to arrest the hæmorrhage I sent for my neighbour, Mr. Utterson, to plug the nose. Before he succeeded

in effecting this the epistaxis ceased, and was almost immediately followed by a convulsive cough, attended by the expectoration of an enormous quantity of bloody mucus. This went on for some hours, and at length ceased spontaneously. The next day she was utterly prostrate and blanched. I was compelled to leave her to see a patient in Hants, and Mr. Utterson took charge of her, with very faint hopes on my part that I should find her alive on my return. However, on the 23rd I found her somewhat rallied, and hope revived. She was quite sure she should die, and requested me to examine her. There was no bronzing; but her complexion must be taken into account. Blood from the finger showed no increase of colourless corpuscles, but there appeared only a small proportion of red to the quantity of serum. On the 25th I was summoned in great haste, as she was said to be dying. On arriving I found that the momentary collapse had passed away, and she appeared better than before. The same summons occurred at the same time on the 26th, and in ten minutes she was dead.

"On the 28th the body was examined by Mr. Utterson and myself. Cadaveric rigidity natural; body plump and well nourished; *bronzing marked*; every organ was found to be perfectly healthy, with the exception of the supra-renal capsules. Of these, the right was altogether destroyed as far as the glandular structure was in question. The left was filled with a pulaceous mass, which under the microscope had all the characters of tubercle. It gave no evidence of amyloid degeneration. The kidneys were altogether healthy, and, in short, so were all the thoracic and abdominal viscera. The head and spine were not examined."

In the last number of the *Dublin Quarterly Journal of Medicine*, the following case is related by Dr. Duncan:—

"The case illustrated in every essential but one all the symptoms and features of the disease as originally described by Dr. Addison—namely, the age of the person and her appearance, the obscurity of its origin, the asthenia without any sensible cause, the peculiar colour of the skin, the weakness and irritability of the stomach, the peculiar condition of the intellect, the suddenness of her death, and the implication of the supra-renal capsules.

"The patient was an unmarried woman, about forty years of age, and had hitherto enjoyed good health. She was a woman of stout build, with a good deal of flesh about her. About a year and a half, or perhaps two years ago, she began to feel a loss of strength, her appetite became bad, and she began to be affected with some irritability of the stomach. About the same period a change in the colour of her skin was noticed, but it was so trifling at first that it passed off for a long time without attracting any observation. It gradually increased, and became at length a source of anxiety to the patient. She came to the hospital on the 8th of March, and died on the 13th. The symptoms under which she laboured at the time of her admission were weakness, loss of appetite, and irritability of the stomach, for which there was nothing in her general history to account. Her appearance exhibited the peculiar character of wasting described by Dr. Addison; her muscles were large and flabby, but soft, and the skin had not at all the appearance or feel such as was usually met with in ordinary cases of emaciation. It was impossible to get her to take any nourishment from the time she came to the hospital, owing to the irritable state of the stomach. Her intellect was peculiar, being restless and excitable. She died at last rather suddenly. The case differed as regards pigmentation from what is described by Addison—namely, in the discoloration being partial instead of uniform. The colour was obvious on the face and exposed parts of neck and arms, and at flexures of joints and at navel, but other parts were very much of the natural hue. Unfortunately a complete post-mortem examination was not allowed, but the kidneys, with the supra-renal capsules, were removed; the latter presented evidences of degeneration. At the head of the capsules was an appearance of yellow tuberculous or scrofulous matter, or as if the organs had undergone a chronic inflammatory degeneration."

In the *Edinburgh Medical Journal* for last September, the following case is quoted from a Belgian publication as occurring in Brussels. A brief outline is as follows:—

A woman, aged thirty-seven, presented herself at the Hospital St. Pierre, about the end of August, 1862, complaining of epigastric pains, with emaciation and brown coloration of the skin. She was admitted, and the affection diagnosed as morbus Addisonii. Death occurred suddenly on the 30th of the following November. The body was emaciated; the characteristic brown discoloration of the skin was not quite so well marked as during life, was most prominent on the face, on the

backs of the hands, around the nipples, in the armpits, between the buttocks, and toward the navel. There were no blanched patches on any part of the body. The buccal mucous membrane presented, at the level of the teeth and along the palatine arch, a succession of irregularly rounded patches, of a bluish-brown colour. Some similar markings were observed on inner surface of labia majora. The supra-renal bodies were found to be three times their normal size; their shape rounded, and converted into tubercular masses, yellowish, and from the size of a pea to that of a bean; the respective weights, 1 ounce and 7 drachms. At the apex of one lung was a cretaceous tubercle. The skin was examined microscopically and found to contain pigment.

In the last number of the *British and Foreign Medico-Chirurgical Review*, in an article on children's disease, the following case is quoted as occurring in Berlin:—

The patient was a boy, twelve years of age, and after a treatment of about three months death took place. The whole surface was very deeply coloured, especially the face, neck, and backs of the hands. At the post-mortem examination the left supra-renal body was found very firmly united to the kidney, and on its surface yellowish-white cheesy points were apparent. Upon section nearly the whole organ appeared to be converted into a dry, very firm, white mass, which at the upper part allowed only a thin lamella of normal gland-substance to be seen. The right supra-renal body was firmly attached to the liver; at its anterior inferior portion some calcareous spiculae projected from the surface. Upon section, here, also, nearly the entire substance exhibited a dry, firm, yellowish-white, somewhat transparent character, with isolated firm white spots interspersed. The microscopic examination showed that the dry yellowish-white substance, into which both supra-renal bodies were almost entirely converted, consisted solely of new-formed thick connective tissue, so that, consequently, the case was one of induration or fibroid degeneration of the supra-renal bodies.

CELIBACY AND MARRIAGE IN RELATION TO UTERINE TUMOURS.

To the Editor of THE LANCET.

SIR,—In your last impression, Dr. Henry Bennet has called into question the accuracy of my conclusions as to the causes of the occurrence of fibroid tumours of the uterus.

So far as I know, Scanzoni is the only modern author who agrees with Dr. Bennet, who, out of sixty-nine cases he had treated, met with thirty-five who had never been pregnant, and hence concluded that sterility had a certain influence in the development of these tumours—(p. 239).

But Dr. West states that out of fifty women afflicted with non-pediculated tumours forty-three were married; or, including the cases of fibrous polypi, out of sixty-two cases fifty-three were married.—(p. 276.)

Dr. McClinton, referring to Boyle's opinion, which was very similar to Dr. Bennet's, says, "In this, however, he is assuredly wrong. Dupuytren investigated this point in fifty-eight cases, and found that fifty-four were married *de facto* if not *de jure*, and that forty-two had borne children. The experience of Malgaigne accords with this; and in twenty-five cases falling under my own observation, where this circumstance was particularly noted, four represented themselves as virgins, twenty-one as being married, and eleven as having borne one or more children."—(p. 110.)

My own, collected from various well-recorded cases, were, for fibrous tumours, 106 married out of 156; for polypi, 135 married out of 152. In reference to barrenness, out of twenty two women afflicted with fibrous tumours five only were barren; out of twenty-four with polypi only three were barren; or conjointly, out of forty-six married women eight only were barren, twelve had one child, six had two, three had three, two had five, three had seven, one had nine, and three had above ten children each.

I am, Sir, your obedient servant,
Montague-square, December, 1863. C. H. F. ROUTH, M.D.

To the Editor of THE LANCET.

SIR,—The question debated in two of your last numbers by Dr. Henry Bennet and Dr. Routh, as to the effect of celibacy or marriage upon the growth and development of uterine tumours, is so important, that the facts which they have

brought forward will be read with much interest. But I venture to suggest that both gentlemen have overlooked a very necessary element in their calculations. The simple fact that more married women than single are seen to be labouring under any given disease is no sort of ground for contending that married are more liable than single women to this disease, unless the relative numbers of married and single women living, about the age of the patients, are also given. For instance, according to the census of 1861, there were only 1,229,051 unmarried women living between the ages of twenty and forty, the proportion of unmarried between those ages being 39 to 100 married. Calculating the whole population, children as well as adults, 58·7 per cent. of the females were unmarried. But the adult spinsters only amounted to 26 per cent. Therefore, in order to argue fairly that fibroid tumours of the uterus are as frequent amongst the unmarried as amongst the married, proof should be given that nearly four unmarried women present themselves with these tumours for every one married woman. If married and single adult patients were seen in equal numbers, then the disease would be less common among married than among single women in the proportion of 26 to 100.

I have seen this very obvious consideration equally overlooked by writers on ovarian and other diseases, or I should not have troubled you with this note.

I may add that I use the word *fibroid*—not *fibrous*—designedly; because, although some portions of these tumours may be fibrous, the great bulk is made up of smooth or unstriped muscular fibre, an element not found in *fibrous* tumours.

I am, Sir, your obedient servant,
Upper Grosvenor-street, Dec. 1863. T. SPENCER WELLS.

BRITISH MEDICAL ASSOCIATION.

To the Editor of THE LANCET.

SIR,—Permit me to suggest how great would be the advantage of an Association really deserving the above title.

The year now ending has brought into the flame of legal persecution at least a dozen medical martyrs, for most of whom has been made a subscription, towards which their private medical friends, and a few systematic liberals, have contributed an undue share, by so much placing these gentlemen under an unpleasant obligation.

The incidence, Sir, of these subscriptions ought to be on the profession at large, not on a few individuals. The trouble of raising and collecting them, as well as the scrutiny occasionally requisite to decide their propriety, ought to be done by an organized body. It is to the honour of THE LANCET that it cheerfully devotes its time and space to such work. But its aid and countenance is all which the profession ought to ask.

There is a British Medical Association, which, were it in fact what it is in name, ought at once, by an investigation and a vote, to supply all that is now done from the pockets of comparatively few of us, and in a manner much less pleasant to those thus reimbursed.

Of course I shall be told that they have not the funds necessary for such purposes. To this I answer that they might soon get them. Let them drop the great expense which drains their blood and consumes their vitals, while alienating so many would-be members. Let them become a Medical Association, instead of the publishers of a journal which, if worth anything, could support itself, and they will find no lack of funds for this or any other legitimate object of association. I, at any rate, might subscribe many guineas yearly, and yet save money, if such an Association did its duty as above suggested.

I am, Sir, your obedient servant,
December, 1863. COMMON SENSE.

SCOTCH, IRISH, AND PROVINCIAL CORRESPONDENCE.

EDINBURGH.

(FROM OUR OWN CORRESPONDENT.)

At the meeting of the Obstetrical Society held on the 9th of December Dr. Graham Weir was elected president. Dr. Pattison, the retiring president, after occupying the chair for the last two sessions, has been, along with Mr. W. S. Carmichael, elected vice-president.