

local applications you draw the patient's attention to the seat of the affection. Where there is much pain in the part you may apply a belladonna plaister over it, or you may moisten it with equal parts of tepid rose water and camphor mixture, and you will find that this application will really relieve the pain. More good however is to be done in these cases by constitutional remedies. If the menstrual discharge has stopped, give steel and myrrh. If the circulation is feeble it will get stronger by giving the carbonate of ammonia in small and repeated doses, either in camphor mixture or in pills made with crumb of bread. If you give it in the latter form, of course the pills must not be put into boxes, but into a well-stopped vial. The following is a very good recipe for hysterical pains:—

Tincture of ammoniated iron, half a drachm ;

Carbonate of ammonia, five grains ;

Camphor mixture, one ounce and a half.

To be taken three times daily.

You must let your patient take exercise, and ride out on horseback, if possible. A person may have pain in the arm after bleeding, because it is said that the nerve is injured, but in the great majority of cases it arises purely from an hysterical constitution. I will give you one or two cases to show you that hysterical disease depends upon the constitution. I know a lady, who whenever she hurts her knee, has very violent nervous pain in it, with spasmodic flexion of the leg or thigh. Such symptoms may in some cases be even so violent as to occasion death. A person injured a nerve in the finger, and there was a constant pain in it whenever the part was moved ; in a short time the pain passed up the neck, and the patient went into a perfect stupor, for the relief of which she was bled and cupped with great benefit. In a few days another attack came on, in which she died. On examining the body after death, nothing was found ; nothing abnormal could be detected, either in the brain or nervous system ; but when I looked to the bladder I found it was distended with a large volume of dark-coloured urine, and I do not doubt that this patient laboured under a hysterical suppression of urine. This was the only morbid appearance I could detect, and I believe that this was the cause of death.

RECOVERY AFTER HANGING,

BY

MEANS OF BLEEDING AND AMMONIA LINIMENT.

To the Editor of THE LANCET.

SIR:—The following case may possess sufficient interest for insertion in your valu-

able periodical. I am, Sir, your obedient servant,

JOHN JOHNSTON, Surgeon.

15, Marylebone-street, Regent-street,

12th November, 1839.

On Sunday, the 27th ult., I was hastily summoned to attend upon a woman who had attempted suicide by hanging herself, and, as the house where the attempt had been made was in the immediate neighbourhood, I was present in about ten minutes after the person had been cut down. I found the woman in a state of complete insensibility ; her respiration was laboured and slow, and the pulse barely perceptible. Without further examination of the symptoms, I at once proceeded to open one of the veins of the arm. The blood flowed pretty freely, and as it escaped, the pulse rapidly improved in strength and character, and the respiration also became less laboured. After about 16 ounces of blood had been taken, with the concurrence of Mr. Wise, a medical man in the neighbourhood, who by this time had joined me, I thought it advisable to wait its further effects, and in the mean time a strong turpentine enema was administered, mustard sinapisms were applied to the calfs of the legs, a bottle of hot water to the feet, and cold application to the head ; the stays were also loosened, and the patient was placed in the most favourable position for the performance of respiration. We had now a little leisure to examine more minutely the symptoms and appearances which the patient presented. The countenance was not turgid, or livid, but pale ; the under jaw considerably fallen, as in a person moribund ; the extremities were moderately warm, and the hands convulsively clenched ; the pupils somewhat dilated, and barely susceptible to the stimulus of light. A dusky red mark, of about a quarter of an inch in breadth, was distinctly observed encircling the upper part of the neck, forming an angle over the ramus of the jaw on the right side, where the knot of the noose (formed by a silk handkerchief) had rested, and in consequence of this circumstance, the strangulation proved less effectual.

After waiting for about half an hour, and finding that, although the pulse continued good, and the respiration comparatively free, there was no appearance of returning sensibility, we resorted to a second abstraction of blood, and from the same opening 16 ounces were taken, when the pulse became quick, and slightly intermittent. A change for the worse now took place in the state of the patient, probably from the bleeding being carried a little too far. The respiration became loudly stertorous, the pupils dilated to their fullest extent, and completely insensible to the stimulus of light ; the lower jaw fell further, and the sphincters becoming relaxed, the contents of the rectum and

bladder were evacuated, and, to all appearance, further measures seemed useless, and the patient's doom seemed sealed.

Under these circumstances, as a last resource, we proceeded to rub the chest and upper extremities with a strong liniment of ammonia, and in a short time our perseverance was rewarded by a decided and favourable change—the woman began to draw up her limbs, as if sensible of the pain of the applications; the pulse regained its strength and regularity, while the respiration lost its stertor, and became regular and less laboured, and presently our patient begun to utter loud moans, indicative of extreme anguish. We continued the friction with the liniment, and the application of the sinapisms, until the cries of the patient became truly painful, and the tossing of the limbs evinced that she was acutely sensible to the pain which these applications caused.

From this time our patient continued gradually to improve, the pupils resuming their natural appearance and sensibility, and in the course of an hour she was able to swallow a draught containing two drops of croton oil, but which she shortly afterwards vomited. Although conscious of pain, she continued in a comatose state until the evening, when she became perfectly sensible to surrounding objects. By this time she had been removed from the apartment where she had suspended herself, to her own room, and as she betrayed by her movements, and the wildness of expression of countenance, an inclination to make a second attempt upon her life, strict orders were given that she should be constantly watched, the hair was also cut short, and cold lotion kept constantly applied.

On the next day I found her more composed; she complained of nothing but *her throat*, and said that her head had ached badly during the night, but she did not *then* complain of any head-ache. From her manner I perceived that she was aware of what she had been guilty, but wished to appear unconscious of what had occurred; and, thinking it better to be silent on the subject, I was thus prevented from questioning her regarding her sensations when suspended, and during returning sensibility.

From this period she remained under the charge of Mr. Wise, who was the medical man of the family in whose service she was a housekeeper; the necessity of keeping a strict watch over her movements continued, but in the course of a week she was sufficiently well to admit of being removed from her place, under the charge of a relation, on the 4th instant. She had not, however, previously confessed that she was at all aware of the attempt she had made upon her life.

It appears that this poor woman had once been in circumstances that placed her above dependance on service. To drown the recollection of this, she gave herself up to

tippling, and, in consequence, had received warning to quit her situation. Her threat of making away with herself had not been regarded; but when, on the Sunday, she had been missed for about ten minutes, a search was made for her, and she was found suspended to one of the cross-bars of a four-posted bedstead, and, probably, would have succeeded in effecting her purpose, had it not been for the clumsy manner in which, fortunately, she had adapted the noose.

I ascertained that she was slightly inebriated before she was missed. She was about 33 years of age, and of a robust appearance.

REMOVAL OF A TUMOUR FROM THE ANTRUM.

To the Editor of THE LANCET.

SIR:—The insertion of the following case in your valuable journal, will oblige, yours respectfully,

WM. QUINTON, Surgeon.

Wolverhampton, Nov. 20, 1839.

Emanuel Blake, aged 17, on the 20th of October applied to me, stating that he had a large gum-boil on the upper jaw, which, for the previous three months, had been very painful and troublesome, so much so that he could not masticate on that side. On examining his mouth, I perceived a tumour protruding from the left antrum, rather firm, elastic, of the consistence and appearance of the gum, irregular on the surface, and about the size of a moderate hen egg. Knowing the disease to be of a malignant character, I stated to the lad the necessity of an operation, to which he acceded. I then made arrangements for the same, and undertook the care of the boy at my house until he should perfectly recover.

OPERATION.

Nov. 4. The boy sitting upon a chair, and the last incisor tooth being extracted, I commenced by making an incision with a strong sharp-pointed bistoury, extending from the external angular process of the frontal bone, to the angle of the mouth. I then reflected the flaps upwards and downwards; this being done, the tumour was brought fully into view. With Liston's sharp-pointed bone-nippers, taking the course of the extracted tooth, I cut up to the floor of the orbit; then crossing immediately below the orbital plate, and removing a portion of the malar bone, I extended the incision to near the zygomatic fossa. I then cut up in front of the last molar tooth to the before-mentioned cross incision, and the carotid artery being compressed by an assistant, I firmly grasped the detached portion of the bone, including the tumour. I tore it down, and the remaining attachments being divided