

ART. III.—*Case of Poisoning by Aconite*. By LOMBE ATTHILL, M. D., Fellow of the King and Queen's College of Physicians; Ex-Assistant Physician, Rotunda Lying-in Hospital.

THE details of the following case of poisoning by aconite may, perhaps, be deemed of some interest, there being but few well-authenticated instances on record, those in which recovery took place being still fewer. The accuracy of the details may be relied upon, as I made notes from time to time by the patient's bed-side.

On Friday, the 4th May, 1861, I ordered the following liniment for a gentlemen who was suffering from a painful affection of the hip-joint:—soap liniment, two ounces; tincture of aconite, three drachms. At the same time I prescribed a mixture, of which he was to take one table-spoonful for a dose. He was a weakly, delicate man, and had for several years been subject to fits of epilepsy. On the following morning, having rubbed in the liniment as directed, he proceeded to take the mixture; but, having placed the two bottles together, instead of doing so, he inadvertently poured out and swallowed a table-spoonful of the liniment, which must have contained 48 minims of the tincture of the *Pharmacopœia*. This was at 10 minutes to 8 o'clock, A. M. He immediately perceived his mistake, and as quickly as possible sent for me; but though no time was lost, I did not reach him till about 20 minutes to 10 o'clock, for he resided in the country. I found him dressed, sitting on a chair in his bed-room, and supporting his head on a table, with a basin before him. He was sickish, having retched frequently, without discharging the contents of the stomach. He had drunk a good deal of warm water, and to this and the soap liniment he had swallowed we may attribute the inclination to vomit.

His appearance did not indicate anything very unusual. He told me that he had been walking up and down the room till within ten minutes of my arrival, when he was compelled to sit down, feeling himself prostrated and entirely overcome by the effects of the poison. He complained of extreme languor, and a great sense of oppression and weight, with inclination to yawn; but his most distressing symptom was a feeling of dry heat and tightness of the skin over the whole body, accompanied by the sensation of numbness and tingling. This, he stated, commenced in his feet, within a very few minutes of his having swallowed the poison, and spread quickly upwards. There was not at this time any dilatation of the pupils, but they seemed to act sluggishly, nor had he any unpleasant feel-

ing about the throat or mouth. His pulse was very feeble, and faltered rather than intermitted; but, within ten minutes of my arrival, it began to intermit in a most marked manner; and the intermissions were more frequent and prolonged, until the pulse ceased to be felt altogether at the wrist.

The moment I had made a few hurried inquiries, I administered the only emetic at hand, namely, mustard. How much I gave I hardly know, for I shook it into a cup, and mixed it as quickly as possible. Immediately on his taking this, I got him into bed, and placed a hot jar to his feet, which were very cold. Shortly after I administered more mustard, the first dose having failed to act as an emetic. After this he began to retch again, but only brought up mouthfuls of frothy mucus, tinged with the mustard. It was now half-past 10 o'clock (two hours and three-quarters had elapsed since he swallowed the poison), and his condition, which had become rapidly worse, was as follows:—

The whole surface of the body was cold, especially the hands and arms; the feet, however, were kept warm by the jar. He lay on his back, with his shoulders elevated and supported by pillows; his face was livid; the eyes were closed, and, except when roused by attempts at retching, or when spoken to, he seemed to be indifferent to all that passed around him; he did not, however, wander in the least, was perfectly conscious, and expressed himself clearly on several subjects I spoke to him of. The pupil of the eye was very slightly dilated; the pulse could not be felt at the wrist, and even in the temporal artery only with difficulty. The heart's action was feeble, irregular, and intermitting, and was momentarily becoming more and more affected. On examining with the stethoscope, its sounds were distinctly audible, and even preternaturally clear, but its impulse was almost wanting. When asked how he felt, he complained only of the great weight of his head, and the numbness of his legs. I should have mentioned that, shortly after he had taken the second dose of mustard, I had commenced the administration of such stimulants as I could procure, namely, brandy and strong coffee; for I was nearly three miles from any apothecary's shop, and could obtain no others. I had also already applied two mustard sinapisms, one over the heart, and the other to the epigastrium; but, although he complained of the pain they occasioned, they did not seem to produce any beneficial effect; so I now determined to apply one to the nape of the neck. I have already mentioned that this gentleman was subject to fits of epilepsy, for the relief of which he had for several months kept open a

small blister, by means of D'Albepeyrre's plaster, on the back of his neck. Over this the mustard had to be applied; and, although I did not remove the dressing, it almost immediately caused great pain, and stimulated him in a marked degree; so much so, that the pulse was again perceptible at the wrist, though it soon failed again.

At this juncture my friend, Dr. White, of Roundtown, arrived, as I had summoned him to assist me in this distressing and anxious case. He brought with him some aromatic spirits of ammonia, of which we immediately administered half a drachm in brandy and water. Soon after swallowing this he vomited freely, and appeared to be somewhat relieved by doing so, but quickly relapsed into his former condition; and now, for the first time, he complained of drowsiness. Hitherto there had been no symptom of spasm or convulsion; but, at about 11 o'clock, he had a very slight convulsive fit, which, however, passed off almost instantaneously. After it he vomited freely, expectorated large quantities of ropy mucus; the pulse also returned for a moment or two to the wrist. At 15 minutes past 11 o'clock he had a second fit, more severe and better marked than the former, and, though short, it was very decided in its character. During its continuance the head and thorax were slightly drawn back; the hands and arms were flexed; the eyes remained open, and the pupils were considerably dilated; respiration, also, was much impeded; and he must have been unconscious, for, on rallying, he said he had been asleep. His vision, too, seemed impaired, although he saw distinctly when roused. He now complained greatly of a dreadful feeling of numbness all over the surface of the body, more especially on the hands, face, and calves of the legs, with a sensation of tightness of the skin of the face, and tingling of the lips; but there was no distress of any kind experienced in the mouth or throat. There was great restlessness and jactitation.

Again there was another interval, marked as before, first, by a transient rallying of the powers of life, followed by still greater depression. This interval we employed in administering stimulants, and in efforts to keep up the circulation by friction over the thorax and on the extremities. We also applied sinapisms to the calves of the legs and to the back. Among other things, we gave strong green tea, as there was a decided tendency to sleep. About this time the bowels were moved—not, however, involuntarily, for he expressed an inclination to evacuate them, so he was directed to pass it in a sheet under him; and he was in the act of doing so, when he was

seized, at 20 minutes before 12 o'clock, with a third fit, this time marked by symptoms of the most alarming character. The hands were clenched; the arms bent, and drawn forcibly backwards; the muscles of the back became very rigid and arched, so as to bear a marked resemblance to the spasm of tetanus; differing from it, however, in that there was no remission of the spasm until the fit entirely passed off. The pupils were greatly dilated; the face was livid; and there were marked symptoms of congestion. Respiration seemed suspended, and at one time I thought him dead. But, by the greatest exertions on our part, by keeping up artificial respiration on the plan recommended by Sylvester, by frictions, and by every means we could devise, we had the gratification of seeing animation return, and the symptoms of congestion pass off. He now quickly rallied, consciousness almost instantly returned, and he said he felt better. The body became warmer, and the pulse was distinct at the wrist. The sickness of the stomach, too, which had ceased after the first slight fit, recommenced, and he vomited freely. This improved condition was, however, of but short duration. We, of course, did not relax our efforts; but, nevertheless, all the bad symptoms returned, and at half past 12 o'clock a fourth fit, if possible more alarming than the last, came on. It was not, perhaps, so intense, as far as spasm was concerned, as the former, but of much greater duration. It lasted twenty minutes, and the struggle which went on between life and death was most painful to witness. I need not recapitulate the symptoms, and shall merely mention that the pupils were, if possible, more widely dilated than before; and the congestion so great at the close of the fit, that Dr. White suggested bleeding from the temporal artery as a last resource; when, just as he was preparing to do so, the symptoms of congestion suddenly passed off, and were followed by such extreme depression, that it deterred us. He drew a deep inspiration, and gradually rallied. This fit seemed to mark the crisis of his case, for his condition now became of an entirely altered character; the stage of depression had gone by, as had also that of convulsive spasm, if I may use such an expression; but now extreme restlessness was the most prominent feature. He turned from side to side, tossed his arms wildly about, and never was at rest for a moment. We had to place pillows along the head of the bed, to save him from injuring himself, so violently did he throw back his arms; his muscular power was not in the least impaired, and he grasped the hand placed in his so violently as to cause pain. The pulse was now good; the body warmer. He vomited again, and, as

before, expectorated quantities of ropy mucus. Altogether his condition was improved. He complained incessantly of the dreadful feeling of numbness in the calves of the legs, and also in his face and hands. Friction over these parts seemed to afford great relief, and he would not allow it to be discontinued even for a moment. He was drowsy, and occasionally muttered incoherently, but he was perfectly conscious when spoken to.

During the next three hours we watched him with the greatest anxiety; for, though now hopeful of a favourable termination, the necessity for exertion had not ceased; the pulse frequently became very feeble, but, by the exhibition of stimulants and constant friction, his strength was kept up. At 5 o'clock a gentle perspiration appeared over the body, which was followed by a diminution of the distressing numbness. At about 5 o'clock he passed urine freely, not a drop having been previously voided, even though the bowels had moved. Shortly after this he took a little beef-tea, and seemed to enjoy it; and, at 10 o'clock, we left him for the night. He was then quite free from pain, though he still complained of the uncomfortable feel in the calves of his legs, and the lightness of his head; the former he lost in less than two days, but the latter did not entirely disappear for sixteen days.

We found him on the following morning in the most favourable state. He had slept tolerably well, and had some perspiration. The tongue was quite clean, pulse quiet; and, in fact, except that he felt weak, and as if recovering from a long illness, he was in his usual health. I had feared that the violent remedies employed—the quantity of mustard, brandy, and ammonia swallowed—might have been followed by symptoms of gastric irritation, but nothing of the kind occurred, and on Monday he was able to walk about his garden. I saw him last week, and he assured me that he had not for some time felt so well.

The treatment adopted was necessarily simple; for, being five miles from town, we had no choice of remedies. There was no stomach-pump at hand; and even had there been, as nearly two hours elapsed before I saw him, it is doubtful whether much benefit would have resulted from its use. The treatment consisted of, at first, the free exhibition of mustard, then of hot brandy and water and strong coffee, given in small quantities every few minutes, though these were rejected as fast as swallowed. After Dr. White arrived, we gave half-drachm doses of the aromatic spirit of ammonia frequently, also brandy and water, as before; and, later in the day, when he became drowsy, strong

green tea. Externally, mustard sinapisms were applied to the epigastrium, cardiac region, nape of neck, and calves of the legs, in succession. Friction was kept up for hours over the thorax, arms, hands, and legs, both with the hand and flesh-brush. During the two severe fits, when respiration was suspended, artificial respiration was kept up by Sylvester's method for some minutes, and with marked success.

I cannot conclude without bearing testimony to the prompt and efficient aid afforded me by my friend, Dr. White.

ART. IV.—*Procidentia Uteri from Perineal Laceration of many Years' Standing. Operation; perfect Cure.* By D. LLOYD ROBERTS, M. D., on the Medical Staff of St. Mary's Hospital for Diseases of Women and Children, Manchester; and Honorary Local Secretary of the Obstetrical Society of London, &c., &c.

JANE W——, aged 49, married at 20; admitted an in-patient of St. Mary's Hospital, on November 24, 1860: she has had eight children, all born alive at the full period of utero-gestation. The menstrual crisis commenced at 13, without any derangement of health—was always scanty and light coloured, and accompanied by severe dysmenorrhœa. She has always been subject to a yellow leucorrhœal discharge since her marriage. The perineum was lacerated in her third labour, now many years ago; and she attributes the falling of her womb to this circumstance.

*Present Condition.*—The uterus is completely procident, and hanging between the thighs; the inverted mucous membrane of the vagina, which now covers the womb, has assumed almost entirely the character of integument; there are two patches of deep-seated ulceration on the sides of the anterior surface, which are ragged and unhealthy, and encroach on the lips, which are enormously hypertrophied, very vascular, excoriated, and in a state of intense inflammation. The surface of the os and cervix is cracked in two or three places, and a free discharge of blood oozes from the fissured surfaces. The uterus can be returned, though with difficulty, and any attempt to reduce it causes extreme pain.

In consequence of the weight of the uterus, the bladder is pulled down in front of it, and the meatus directed upwards. There is great irritation of the bladder, evinced by frequent desire to void the urine, which is high-coloured and ammoniacal; the perineum is lacerated, the greater portion of the