

The man never fairly rallied from the operation. He suffered from incessant vomiting for thirty-six hours, which obstinately resisted all treatment. He finally sank on the third day.

WESTMINSTER HOSPITAL.

IMPENDING SUFFOCATION FROM DRINKING BOILING LIQUID; LARYNGO-TRACHEOTOMY; RECOVERY.

(Under the care of Mr. FRANCIS MASON.)

THE operation which was performed in this case is one which there is no doubt has often been done unintentionally in the surgeon's endeavour to open the trachea. In the present instance the cricoid cartilage was purposely divided, with the object mentioned by Mr. Mason in his remarks.

A child aged two years was brought to this hospital at 1 P.M. on the 26th of June, 1868, suffering from great difficulty in breathing. His mother said that at 8 A.M. on the day of admission he drank from the spout of a teapot which she had just filled with boiling water. When seen by Mr. Mason, the child had the most distressing dyspnoea, which was becoming more urgent at each inspiration. With the concurrence of his colleague Mr. Brooke, Mr. Mason opened the trachea high up, and cut through the cricoid cartilage. When the tube was introduced, which was readily accomplished, the patient was instantly relieved. In the after-treatment, the tube was taken out at intervals, in order to ascertain if the child could breathe without it; but it was not until the twelfth day that the tube could be wholly dispensed with. The wound in the throat healed rapidly, and the child left the hospital perfectly well on July 24th.

In his clinical observations on this case, Mr. Mason spoke of the carelessness on the part of parents in allowing their children to drink from a teapot or from a kettle—both common occurrences amongst the poorer classes. He said he had purposely opened the windpipe high up. The operation, which was undertaken with the view of affording immediate relief, was simple, and was rapidly completed. He might have performed laryngotomy, and, had he done so, would have made a transverse incision in preference to the vertical one. He, however, thought it prudent in this instance, on account of the extreme youth of the patient, to perform laryngo-tracheotomy. Thus a larger tube could be inserted, which enabled the child to breathe with greater freedom, and there was less chance of its being obstructed by mucus. Mr. Mason ventured to think that many of the difficulties experienced in the operation of tracheotomy arose from the windpipe being opened too low down.

LONDON HOSPITAL.

AMPUTATION OF THE UVULA.

(By Mr. C. F. MAUNDER.)

WITH a view to prevent, in great measure, the painful sensations arising from the passage of a bolus of food across the raw stump of a previously elongated uvula, Mr. Maunders proposes to amputate this organ by the double flap method. These fall together, and their cut surfaces being in contact, no raw surface is exposed to irritation. He recently adopted this plan with a highly satisfactory result, introducing a small suture to maintain coaptation of the flaps.

Clinical Records

OF

THE PARIS HOSPITALS.

HÔPITAL NECKER.

FOUR CASES TENDING TO ILLUSTRATE THE ABSORBING POWER OF THE BLADDER.

(Under the care of Dr. GUYON.)

THE following cases will be found of interest as assisting to elucidate an obscure point of physiological therapeutics which has given rise to much difference of opinion. Not further back than in our number for June 20th, Sir Henry Thompson, in his lecture on Cystitis and Prostatitis, mentions that injections of anodynes into the bladder are of hardly any

value, and that the quantity injected matters little, because the mucous membrane of the bladder appears to have no absorbing power; whilst in a preceding number (Oct. 19th, 1867), Dr. Braxton Hicks, in a lecture on a similar subject, states that he has derived the best results from the employment of injections of morphia. The following clinical observations, and particularly the fourth, would appear to support the latter opinion. We are indebted for both the details of the cases and the remarks which precede and accompany them to Mr. Edward Alling, Dr. Guyon's talented house-surgeon.

There exists a wide difference of opinion between medical men with regard to the absorbing power of the mucous membrane of the bladder. In the number of the *Gazette des Hôpitaux de Paris* for March 7th, 1868, may be read a summary of the results of the more recent French researches upon this subject. These results are highly contradictory. Thus the Messrs. Ségalas, whose experiments were performed upon various animals, fully admit this absorbing power of the bladder. M. Demarquay, whose researches were confined to the morbid human bladder, considers this organ as barely capable of absorbing medicinal substances. MM. Kuss and Susini, on the other hand, absolutely refuse to admit this property. It may be well to say that these experiments were confined to the healthy bladder in man. The practical results derived from the observation of the four following cases would tend to prove that if the absorbing power of the bladder is not great, it does really exist as well in the healthy as in the morbid condition of the organ. The effects of injections with chlorhydrate of morphia were carefully studied as to the light which they might reflect on this point. The injections were made by means of Pravaz's large syringe, and of a small elastic probe *à bout olwaire*, which enables the operator to keep a correct account of the quantity of fluid introduced. Each drop of the solution contained two milligrammes of chlorhydrate of morphia.

CASE 1.—N—, aged forty-five, was admitted into the hospital on Feb. 16th. She had been suffering from cystitis for the last five months, and for six weeks has been unable to maintain the recumbent position for any length of time. She gets little sleep, and consequently has lost flesh, while her features bear the expression of pain. An injection of thirty drops of chlorhydrate of morphia (sixty milligrammes) into the bladder, which was first evacuated. No relief.

Feb. 17th.—Same quantity injected. Slight relief.

18th.—No injection was given in the morning, and the patient complained she suffered more than previously in the afternoon. At five P.M., sixty milligrammes of the same solution were injected. This gave notable relief till near midnight. During the night she passed urine only ten times, whereas before being admitted into the hospital she used to discharge urine forty and fifty times in one night.

21st.—Half an hour after the administration of an injection of thirty drops (same solution) symptoms of narcotism manifested themselves—congestion of the face, drowsiness, incoherent talk. Her neighbours in the ward said that she looked like a "drunken woman." No vomiting. This condition lasted till three o'clock. The same evening thirty drops were again injected, but with no fresh symptoms of narcotism.

22nd.—Thirty drops injected in the morning, but the evening injection was withheld. The next morning she complained of this, saying that she had had no sleep the whole night, and had suffered intense pain.

23rd.—Three injections of thirty drops each were administered, with considerable relief to the patient. From this time to the 30th of April the injections were continued, with the same favourable results as above mentioned; but the disease was then complicated by inflammation of the right kidney, and the treatment was suspended.

CASE 2.—M—, aged thirty-one, was admitted into the hospital on Feb. 19th. Has been suffering from cystitis for ten months. Thirty drops of the solution were first injected, and the very next day there was much relief.

Feb. 22nd.—Injection of twenty-five drops twice in the day.

23rd (fourth day after admission).—The patient asserted that for six months he has never experienced the relief which he now feels after the injections of morphia.

25th.—Injections suspended.

26th.—The patient said he had suffered considerable pain during the night. The injections were resumed; and the introduction of thirty drops of the solution into the bladder gave immediate relief.

From Feb. 28th to March 4th twenty drops only were injected every morning, with no increase of pain.