

such as we see every now and then in the nerves of the face, it is a disease which you may occasionally cure by iron and arsenic; but so far as my experience goes, in the *greater* number of cases the relief is only temporary. You may certainly do great good, but the relief is often temporary, and the disease frequently either has worn itself out at last, or has continued more or less till the patient died." I think it must appear to all, that the learned lecturer is here drawing a *general* inference from an individual case. I find him to have given a very different opinion in some observations he made upon a *successful* case under his care in St. Thomas's Hospital, a condensed copy of which, taken from the hospital reports, I transcribe.

"M. F. ætat. 33, of spare habit, was admitted into Lydia's Ward, under the care of Dr. Elliotson, on the 19th October. She had been suffering for three months past with a pain which, commencing in the great-toe, ran along the tibia to the ham. She described the pain as a shooting, stabbing kind of pain, brought on by the slightest pressure or friction. Ordered to take two drachms of the subcarbonate of iron, every six hours. She gradually improved under the use of the iron (having, it appears, taken nothing else) up to the 31st. From October 31st to November 7th no improvement had taken place, so the dose of iron was ordered to be increased to half an ounce three times a day." The reports on the 11th and 18th of November, state, that she is gradually improving, but that she feels soreness about the limb, but bears without pain, strong friction and grasping. On the 28th of the same month she is reported quite well, and left the hospital after a few days.

It will be observed, on perusing this case, that the severity of the pains was much diminished shortly after the patient had commenced taking the carbonate of iron. In fact, its character was changed from the shooting, stabbing, pain of *tic douloureux* to dull aching; but this latter symptom, it will also be seen, remained for some length of time unrelieved. In reference to this circumstance, Dr. Elliotson remarked to the pupils, that he had on several occasions observed a similar result from the exhibition of the carbonate of iron. He said that he did not pretend to offer any explanation of the why and the wherefore, but simply mentioned it as a pathological fact worthy of notice.

My anxiety that no one, by any authority, should be deterred from using a remedy so valuable as the carbonate of iron in so distressing a disease as *tic douloureux*, is, I

repeat, my sole reason for troubling you with this communication.

I remain your obedient Servant,

R. HUTCHINSON, M.D.

Physician to the General Hospital
near Nottingham.

Nottingham, Jan. 6th, 1833.

* * According to the statements made by Dr. Elliotson in his clinical lectures, carbonate of iron is invariably the first medicine which should be tried in all cases of neuralgia, and in the case in question it was both given first, and in immense quantities, and when the stomach would bear no larger doses, the sulphate of iron was added. In fact, the carbonate was not laid aside until its inefficacy had been fully ascertained, and even then it had a second trial. The Doctor, indeed, appears to consider the carbonate of iron as the most beneficial of the remedies which he has yet tried in neuralgia, although as one of very variable and undecided effect.—ED. L.

ON

DRY CUPPING.

WITH CASES.

To the Editor of THE LANCET.

SIR,—Dry cupping appears to me to be a very valuable remedial means, and one much less in use than it ought to be. I have been in the habit of practising it for many years with the greatest success in an immense variety of cases, and shall select one or two, out of many, as illustrations, in the hope that the attention of the profession may be directed to it. I am very certain that in many instances the scarificator might be spared, and the blood allowed to rest in the veins of the patient, if dry cupping were used instead; and at the same time all the good done that could have resulted from the other method. In a great city like this, where people can so ill spare blood, a remedy that promises all the good, and more than all the good, that cupping can give in many instances, must be very valuable. I have seen in certain habits here, cupping ordered and repeated, which, instead of doing good, did harm; the patient could not spare the blood as he might have done had he been in, or recently from, the country, and became worse from that hour.

I have not the folly to imagine that certain acute diseases, such as phrenitis, and many of the other acute inflammatory affections, could be managed better, or as well, by dry cupping as by wet; but I should

say, that wherever the pain is dull, though severe, deep-seated, chronic, not much increased by pressure, or has *refused to yield to ordinary means*—there would I put it in practice; and if required on a part of the body where a cup could not sit, on the nearest convenient spot. I have found it in pains of the deep-seated organs, and even on the hips, in sciatica, for instance, superior, infinitely superior, to leeches and blistering, or any other species of common counter-irritant.

The feeling is agreeable to the patient, and instead of being complained of, is borne with the strongest expressions of pleasure. I have seen timid people afraid of the sort of sensation (young ladies particularly), but when the operation was over, they have laughed at their fears. I have, again and again, used it with the very best success in delicate females, in young men, and in old, and once or twice in the case of my own mother, for deep-seated pain in the region of the liver, which, on being removed by other means, had always returned. She died too soon afterwards, of another complaint, to see whether the relief was permanent or not. These are a class of affections (chronic liver complaints, without alteration of structure) in which this remedy is likely to prove very valuable. It is well worthy of being tried.

Among the numerous men employed at a large public work in the west of Scotland, of which I had the medical charge for several years, I put it in requisition for all sorts of pains, with such success as to astonish them and myself; and at last it became so well known, that they used to call it "The Doctors' Sucking Glass," and, indeed, some of the more intelligent of them attempted it among themselves.

The way in which I generally use "dry cupping," is to throw a very minute bit of paper, touched with ether or turpentine, lighted, into a large glass or tumbler, and press it down in the usual way. This, though not perhaps the most elegant, is by far the most powerful way of producing sudden determination towards the surface. I can, in almost any instance, in a favourable part of the body, fill the glass or tumbler more than half full of integument and muscle, and in one or two instances (one in particular, the case of a lady) have seen the blood sweat through the pores of a healthy but fine skin. I prefer large glasses to small, where they can be used. On the chest, back, belly, or hip, where they have plenty of space, I would put on two or more at once, and of a size much larger than those in common use.

The usual more elegant way of employing the common glasses and spirit lamp, might do in particular cases; yet there are

so many situations where a man may require apparatus for sudden action, that I conceive this (Baron Larrey's) method preferable—as well because the necessary materials for its performance can be got in a moment anywhere and everywhere, as because you can produce in this manner *much more* action on the surface than by any other.

In ordinary cupping, when the scarificator is used, a great power (suction, to express it vulgarly), as is well known to all experienced cuppers, is not desirable, the high pressure condensing the air in the glass so much as to prevent the free flow of the blood. But where there is no blood wanted, but merely quick and excessive action on the surface to relieve the parts within or around, the more pressure that can be induced the better. For these reasons, in "dry cupping," I prefer the practice and process above mentioned. I shall now relate a case or two in illustration.

Case 1.—SPINAL IRRITATION.

Jacobina M., a lady, *æt.* 20, living in the country, and otherwise perfectly healthy, had been troubled for some time with tenderness in the back, which was painful on pressure, and occasionally gave her a good deal of uneasiness. She had been my patient once or twice before for other complaints. On this occasion I happened to be on medical business in the part of the country where she lived, and being upon most intimate terms with the family, made an accidental call, and found one of the young ladies so very ill as to have sent for the village surgeon—a gentleman decidedly clever, but careless, given to the bottle, and one whom the family by no means liked;* the illness, however, was so severe and so sudden, that the usual assistance could not be had in time. I declined interfering, apologised, said my call was altogether accidental, and that the gentleman in attendance was perfectly able to manage the case. They refused, however, to let me leave the house till I had seen the effect of some leeches that had been ordered. A messenger had been sent for them, and, on his return after midnight, it was found that none could be got, unless he were sent to town, some three or four miles off.

They begged I would step up-stairs and see if I could suggest anything that could be commanded without loss of time. Upon doing so, I found her groaning and writhing in bed, and if these are to be taken as evidences, she was suffering most acutely. The pain was wholly confined to a spot at

* Since the above was written, I have seen his death announced in the newspapers of the day.

the very edge of the last dorsal vertebræ, which, upon being pressed, made her scream out violently; no swelling or discoloration. The leeches, which had been ordered by the gentleman in attendance, I told the family were the best thing that could have been suggested, but since they were not to be got, we must think of something else, and not allow the lady to lie till morning in such agony as this. At cupping I knew they had a horror. They have a much greater dislike to it in Scotland than in this country. I therefore proposed to dry cup *all around* the parts, and assured the ladies that from my knowledge of this remedy I could depend upon its at once relieving her, and if any annoyance remained in the morning, they might send for the leeches and use them.

There were none but ladies in the family; they were much afraid, and I was absolutely compelled to put a small glass upon a lady's hand, and another on my own, to convince them of its harmlessness and simplicity, but particularly that there would be no cutting. I used two small crystal tumblers and a little whiskey—materials to be found in every house in Scotland. On each side of the painful vertebræ I put one, when she experienced *decided* and *immediate* relief. By the time I had changed them three times, she declared herself perfectly well: comfort was substituted for agony, and so delighted was she, that the last cup was scarcely off, ere she was joking and quizzing every one in the room as usual.

Case 2.—SPASMODIC PAIN IN THE LOINS,
POST COITUM.

A stout young gentleman, and in fine health, was seized shortly after connexion, with most violent deep-seated pain in the region of the *left* kidney; so severe, that he was unable to walk, stand, or sit. Lying on his back on bed, or on a sofa, gave a little, and only a little, relief, and frequently did not relieve him at all. He had been often attacked similarly before, and traced it distinctly to connexion. The peculiar sensation in the part commenced immediately after coitus, and could be felt distinctly increasing more and more till it ended in a paroxysm. Sometimes the sensation went off altogether, particularly if he carefully kept the recumbent position; but when it did not, four or five hours would intervene before the paroxysm came to its height. In one instance he was attacked severely while walking home, and had very nearly fallen down in the street. In another he was awoke in the night. Twenty or thirty leeches relieved it the first time. In about two months it came on again, when bleeding at the arm, and 70 leeches over the seat of pain, gave him only moderate ease.

After some months' interval it returned a third time, and leeching, even to a very great extent, seemed to have altogether lost its power. A blister and some internal medicines were prescribed by a physician with little relief, when I ordered 20 leeches to the anus; this, and the recumbent position for two days, subdued it.

A fourth time he felt it coming on. This was at midnight (connexion having taken place some four hours previously), and when I saw him, the pain in the left lumbar region seemed frightful, deep-seated, and of that peculiar nature that he could bear almost any pressure on the part without shrinking. He lay in bed writhing like a serpent.

I felt loath to bleed him to such an extent as had been requisite formerly to subdue it. Leeches were not at this time conveniently to be had, and I determined to try the effect of dry cupping. A very large tumbler was put over the part, kept on for a minute or two, till it seemed to gall him; taken off and replaced three or four times. The effect delighted and almost astonished me. One minute after it went on, the most perfect relief was felt; the pain was entirely gone; so afraid was he of its return, and so keen to have the glass on, that he insisted upon having it on and on, till the edges of the tumbler had almost cut into the muscles! This he declared he cared not for. It was a trivial thing compared with the dreadful and insufferable pain in his side. I knew him for years afterwards, and though the cause was continued as before, he never had any return.

This is rather a curious case. It is not to be supposed that this distressing affection came on after every individual coitus. The gentleman had many times connexion with his mistress during the interval, without any annoyance. When the paroxysm came on, it was most frequently about two a.m., when he awoke in a state of the most restless agony. One physician imagined it to be some gastro-enterite, producing a certain degree of irritation in the kidney. It must be admitted, however, that he did not inform this gentleman of the cause of his complaint. The patient, a most intelligent person, informed me he did not think this at all necessary; the disease was in existence, and he wished it removed. Had he told the physician the cause, probably to his prescription would have been added a caution against its repetition; but as he was thoroughly aware of the importance of this, and could prescribe it for himself, he did not see the necessity for giving the information. He did not conceal from me the cause of the complaint. There was no affection of any kind about the genitals. The pain

appeared to me to arise from a violent spasmodic affection of some of the deep-seated muscles in the back thrown into action during the sexual congress; but how these deep-seated muscles should be so seriously affected at one time post coitum, and not at another, must, I suspect, be explained by some circumstances peculiar to the individual or the occasion.

Cases 3 and 4.—DISEASE OF THE LIVER.

There were two cases of what are usually called chronic hepatitis (old liver disease), but which appear to me to be more often simple congestion produced by disordered bowels. One of these cases was my own mother, the other the wife of a tradesman. They had the usual symptoms, pain in the right hypochondrium, &c. and had undergone the usual treatment; the pain had often returned. At the time I tried dry cupping, they had both unusually severe pain in the region of the liver, which quite disappeared on using two or three cups. I have not given their cases at length, because I did not see the parties long enough afterwards to form a just opinion as to its permanent efficacy. I had the misfortune very shortly thereafter to lose my mother; and the other person removed to a distant part of the country.

Case 5.—PAIN IN THE LEFT UMBILICAL REGION.

A very interesting young lady, the wife of a friend of my own, left — for Edinburgh, immediately after the marriage ceremony was performed; and when about half way, was seized, while in the carriage, with most violent pain in the left umbilical region. Her husband managed to get her by easy journeys to Edinburgh, where she remained about three weeks, and was bled, blistered, purged, and put through all the ramifications of the strictest antiphlogistic system.

At length she was obliged to be brought home by short stages, a distance of 40 or 50 miles; and was ultimately relieved by turpentine enemata, which brought away some discoloured hardened feces. Her menstrual periods had for years been attended with extreme pain. During the two years which followed marriage, she was said to have had two miscarriages. During the third she miscarried again, and was getting round, when I was suddenly sent for, on account of an alarming pain in the very spot which had formerly been so productive of suffering. She could not account for it; she had been lying quietly in bed, and had been eating and drinking nothing to produce it. The lochial discharge went on as usual, and her bowels were natural, as she

had, ever since her former attack, used Maw's instrument. Leeching was proposed, but to this I objected, on account of the loss of blood she had sustained so lately, and from the effects of which she had not as yet recovered.

I determined first to try dry cupping; she assented, and as the things are always at hand, in five minutes she was so well as to be able to joke with her husband and me about "the very troublesome wife" the former had. It never returned.

Case 6.—PAIN AFTER A FALL.

Hugh Broggan, ætat. 30, a little Irish calico-printer, had a fall when a boy, upon his side, in which situation there had been a pain ever since. Has been often, he says, bled at the arm, leeches, blistered, &c., for it, with only temporary relief. Dry cupped him over the part; and he left the house without the least sensation of pain in the spot.

Case 7.—PAIN IN THE LEFT LUMBAR REGION.

Donald Campbell, calico-printer, ætat. 42, addicted to drinking ardent spirits, has for a long period complained of a deep-seated pain over the situation of the left kidney; his digestion and health otherwise pretty good. Saw a surgeon in the country lately, who called his disease "a thickening of the stomach," and cupped (with the scarificator) and blistered the epigastrium. From these measures, the relief he experienced was next to none, and, consequently, he applied to me.

I found he could not bear even slight pressure on the left lumbar region, and I determined to try my favourite dry cup. I put on a glass some three or four times; he expressed himself quite relieved and went away well. He is a notorious drinker of whiskey, and I had no hopes of its proving effectual unless he gave up his vice, a thing still more hopeless. He called some days thereafter, however, and I found him able to bear the severest pressure on the part, where, formerly, the weight of a hand distressed him.

Case 8.—RHEUMATISM.

A. B., Esq., ætat. 32, had, for two years, occasional rheumatism of the muscles of his back and shoulders. He had one attack so severe as to render him very irritable. It was not acute rheumatism, but the common severe chronic. I covered his back with my dry glasses, chased it from one part to another, and, to the great delight of my friend and myself, it completely left, and he had had no return of it six months afterwards, at which time I left that part of the country.

Since writing the above, in looking over my notes, I find (*Johnson's Review*, 1827, page 278; I quote from my notes) mention made of two cases at the Royal Academy of Medicine, by M. Camin, where *dry cupping the perineum*, and a blister to the sacrum, cured incontinence of urine in two boys, one 14, the other 16, years of age. One of them had had it two years. During the course of a month it had required sixteen to twenty applications. Almost every other means had failed. I have the honour to be, Sir, your very obedient,

J. H. ROBERTSON, Surg. &c.

52, High Holborn, Jan. 7, 1833.

LONDON MEDICAL SOCIETY.

Monday, Jan. 14th, 1833.

Dr. BURNE, President.

CAUSE OF HOOR-GLASS CONTRACTION?—

Influence of Accoucheurs over Births.—Powers of the Ergot of Rye.—Contrast between the Midwifery of England and Ireland.

THE PRESIDENT proposed for the consideration of the Society, a suggestion relative to the cause of hour-glass contraction of the uterus, founded on the following case, to which he had lately been called. A lady was taken in labour at a moment when no accoucheur was at hand, and the attendance of Dr. Burne became a matter of necessity. The child was born hastily, and before his arrival, when, on proceeding to ascertain if all was right, he found that the uterus was as high as the navel, and hour-glass contraction apparent; the funis was detached from the placenta, in consequence of its being very short. He took the necessary precautions against hemorrhage, and, accordingly, none occurred during an hour, when Dr. Merriman arrived, and the fact of the hour-glass contraction was confirmed. Ten or fifteen minutes then elapsed, amid serious apprehensions, before the placenta could be brought away. When a student, he had observed that this contraction in the uterus commonly followed either the sudden birth of the child, when no professional man was present, or the hurrying of the child into the world by an officious nurse, or its rapid expulsion by the uterus. This impression was strengthened by the present case, and he now wished to know what the Society thought of the view, that hasty births were always the cause of hour-glass contraction. If they were, the remedy for this important evil would be a retardation of the expulsion, and the evil of rapid deliveries might be enforced,

especially amongst female accoucheurs, who were particularly proud of rapid births. Their anxiety to have the child born in a moment was such, that the instant the head presented itself, they began to pull out the child, whether nature was helping them or not. He had no doubt that this was done in the present case. The attending nurse was a woman of some consequence, real and affected,—no other than the nurse who waited on the late Princess Charlotte—and took the merit to herself of having got the child born before any medical man arrived, though he (Dr. Burne) could have told her that her great cleverness was a great misfortune. When speaking of a hasty birth, he meant a birth where the child was born at one instead of two contractions of the uterus.

The following debate ensued:—

Mr. GOSSETT. Is it possible to retard a birth at all? I doubt it.

Mr. BURT. I do not think it possible.

Mr. DENDY. Both artificial retardation and acceleration are possible. I have seen them produced repeatedly. The pains will sometimes expel the head so far out of the vulva, that I could get it in my hand. The pain will then cease, and the head so return, that you can scarcely reach the vertex. Another pain will follow, and so much of the work of birth have to be performed over again. If in such a case I put my finger into the rectum when the head first comes down, and employ it to accelerate the delivery, I can certainly do so. As to delaying the birth, the possibility of that is very obvious. It is both necessary and practicable on all occasions, for instance, in which the laceration of the perineum is threatened. I might quote the cases cited by Dupuytren in a lecture lately published in this country on that subject, were the reference necessary.

Mr. HOOPER. I also agree that the birth can, where circumstances advise it, be retarded. In a recent case, where the head was coming down with a part of the funis beside it, I pushed the child back again, put the cord past the head, and the child was born in security. I frequently retard the birth. In fact, it is often wisely retarded by nature itself. The head often comes down first, and then returns, having aided the dilation of the parts, for the more easy accomplishment of the entire birth.

Mr. LINACRE. I always partially retard the birth by supporting the child with firm pressure, and have never had either the hour-glass contraction or ten minutes delay of the placenta.

Mr. DIMOND. According to my experience, if the pains be sufficient to expel the head and shoulders at one effort, you cannot, if you would, retard the birth an in-