

Original Communications.

REMARKABLE CASE OF INJURY OF THE BRAIN. DEATH ON THE TENTH DAY.

By SHERMAN COOPER, M.D., Claremont, N. H., late Surgeon 6th Regt. N. H. Vols.

[AN abstract of the following case was presented, some months since, to the Boston Society for Medical Improvement by Dr. J. B. Upham. It excited considerable interest at the time, and was deemed worthy to rank among the many remarkable cases of injury to the brain which have been brought to the notice of the Society within the last few years. At our request, Dr. Cooper has furnished his original notes of the case, and has kindly deposited the spike and a portion of the planking alluded to in his report, in the Museum of the Massachusetts Medical College.—ED.]

On the morning of the 4th of December, 1868, I was called to see Edmund Seiger, about 28 years of age, who had fallen from a scaffold, 16½ feet high, in a barn, his head striking upon an iron spike which projected about two inches from the floor. This spike was made of wrought iron, with a flattened head projecting on either side from the shaft in the form of a T. It entered the head at the upper and posterior part of the right parietal bone, carrying before it a portion of the skull (an inch square) into the substance of the brain to the extent of about two inches. The skull was fractured likewise in a line extending from the point of the injury nearly to the right ear. This fracture allowed the bones to separate and close again, as the spike was driven through the skull, so as to button the patient firmly down to the floor.

Great injury had been done to the brain, before my arrival, in the attempts to extricate the head from this position—two strong men having exerted a good degree of force in attempting this, but in vain. The patient was finally released by splitting the

plank to which his skull was attached, an axe and a crowbar being used for this purpose. At the time of my arrival, about an hour and a half after the accident, the spike still remained in the skull. After removing this by careful separation of the parts, I extricated, by means of an elevator and forceps, the square piece of bone above mentioned, and subsequently four other smaller fragments, and raised the adjacent parts to their proper position. Immediately after this the patient was able to speak and to converse rationally. There was, however, a complete loss of sensation and motion on the left side. About seventy-two hours after, severe pain in the left arm and leg ensued, which lasted for half an hour, when almost instantly sensation returned and the pain subsided, but motion never returned. He continued in a rational condition, and wholly free from inflammatory symptoms, until the ninth day, his pulse never rising above 70 in the minute. On that day, however, the portions of the brain which had been broken down became separated and were discharged. From this time the patient rapidly sank, and died on the day following—the tenth from the time of the accident.

On examination after death, I found that the substance of the brain had been very much broken up for a space of about four inches in diameter and two inches in depth, caused by the patient's being violently wrenched and twisted around while spiked to the floor.

The spike measured 3¾ inches in length and 1½ inches across.

February, 1870.

SYPHILITIC STRICTURE OF THE ŒSOPHAGUS.

By W. A. GILLESPIE, M.D., Louisa Co., Va.

WRITERS for medical journals generally, in publishing ordinary and extraordinary cases and surgical operations, fail to give subsequent or final results. I will therefore call the attention of your readers to a case of syphilitic stricture of the œsophagus operated

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on by me in February, 1869, and published in your JOURNAL Dec. 16, 1869, New Series, Vol. IV., No. 24. That case, from being one of great agony and torture, with constantly threatened fatality, was immediately relieved, with a comfortable and improving condition up to the present time. Herewith is an extract from an unsolicited letter from the patient, which I give verbatim (excluding only some very highly flattering and thankful expressions to myself, which might seem egotistical in me to publish). The patient lives about fifteen miles from me, in Orange Co.; his case was of several years' duration.

"JANUARY 25, 1870.

"My kindest of Friends,—The Medical Journal containing report of operation on my throat was received this morning. * * * My throat has been less inclined to ulcerate since your operation than it ever was before, but is still disposed to contract. I avoid any *inconvenience* from it, however, by the frequent use of the instrument you directed. I suffer greatly sometimes with pains in the bones of my head and limbs, but I find iodide of potash a sovereign remedy for that as well as ulceration of the throat. One remarkable thing about my disease is that these pains always cease when my throat ulcerates. I am never afflicted with both at the same time."

I learn from the patient's friends that he is comfortable and improving. This case originated in syphilis and a profuse salivation. If your readers will turn to page 378 of the July number for 1869, they will see a mild case reported by Dr. Sinclair, treated successfully by the use of a probang, iodide of potassium, &c. Two cases are referred to by Dr. Langston Parker in his work on syphilitic diseases, London, 1860; both cases died, exhausted from inability to swallow food, and it does not appear that there was any surgical attempt at relief.

March 7, 1870.

ON THE TREATMENT OF SYPHILIS BY SUBCUTANEOUS INJECTION OF SUBLIMATE. VIEWS OF THE VIENNA SCHOOL.

Translated by J. C. WHITE, M.D.

[In connection with what has already appeared in the JOURNAL upon Lewin's method of treating syphilis, the results of its use in the two great clinics of Vienna may be of interest. The following extracts from the annual report of the General Hospital of that city are taken from the last number

of the *Archiv für Dermatologie und Syphilis*.]

In the clinic of Prof. Hebra the method was employed upon 20 males and 20 females. Although the abscesses, at the point of injection, were of a mild character and appeared in only a few of the cases, and although the patients did not in general object to the fresh pain which was daily inflicted upon them, he could not bring himself to continue the treatment. Its effect upon the syphilitic symptoms was later in manifesting itself, as a rule, than by inunction with unguentum cinereum. Against individual symptoms, such as pains in the head and joints, the employment of the usual remedies, as iodine, could in no way be given up, and relapses were as often observed as in other methods of treatment. Inasmuch, therefore, as this method acts less quickly and surely than those hitherto employed, and appears to have no effect against some of the symptoms of the disease, and, finally, as it always gives rise to pain and occasionally to abscesses also, Hebra concludes that the method cannot be especially recommended.

In Sigmund's clinic the injections were practised upon more than one hundred patients, affected by nearly all forms of syphilis. The solution employed for injection was of about the same degree of concentration as that used by Lewin—four grains to the ounce of distilled water. In the beginning twelve grains of this solution were injected once or twice a day; afterwards, twenty-four grains once a day. The regions which showed themselves best adapted to receive the injections were, as Lewin recommends, the sides of the thorax, the groins, the buttocks and the upper arms. Attempts to enlarge these limits led to unfavorable results. Neither the outer, front, or inner surface of the thigh, nor the upper scapular space were found fitted for the injections. On the thigh severe phlegmonous inflammation and abscesses formed about the point of injection. Special attention was directed at the beginning of treatment and throughout to the care of the mucous membrane of the mouth. Cleansing by the nasal douche, by gargles, and by the application to the gums of tincture of rhatany and galls was energetically carried out, and to this alone is to be attributed the prevention of those severe cases of stomatitis which Lewin met with. Without the observation of such rules it would be often impossible to carry out the treatment. It excludes, therefore, patients with